

DOCUMENT RESUME

ED 123 848

EC 090 202

AUTHOR Brundage, Elvira; And Others
 TITLE Health Education for Special Children: Senior High
 EMR.
 INSTITUTION Cortland-Madison Board of Cooperative Educational
 Services, Homer, N.Y.
 SPONS AGENCY New York State Education Dept., Albany. Div. of Drug
 and Health Education Services.
 PUB DATE Jan 76
 NOTE 126p.; For related documents, see EC 090 196-205
 EDRS PRICE MF-\$0.83 HC-\$7.35 Plus Postage.
 DESCRIPTORS Alcoholism; *Curriculum Guides; Dental Health; Drug
 Abuse; *Educable Mentally Handicapped; Exceptional
 Child Education; Family (Sociological Unit); *Health
 Education; Mental Health; Mentally Handicapped;
 Nutrition; Perception; Prevention; Public Health;
 Safety Education; Senior High Schools; *Special
 Education

ABSTRACT

Intended for teachers and administrators in special education, the curriculum guide offers information on planning a health education program for educable mentally handicapped children in senior high school. Sections preceding the actual guide include information on specific goals of and elements necessary for a successful health education program, the philosophy and implementation of a school health program, and a curriculum overview. Units are presented in outline form for the following topics: nutrition; sensory perception, dental health, health status and disease prevention and control; drugs, alcohol, and tobacco; mental health; family life; consumer, community, environmental, and public health; and safety and first aid. Each topical unit consists of five basic parts--overview and objectives (a brief orientation to the philosophy regarding the unit), concepts (necessary background material for behavioral change), content outline, learning and evaluative activities, and resources (including books, films, pamphlets, and games). (SB)

 * Documents acquired by ERIC include many informal unpublished *
 * materials not available from other sources. ERIC makes every effort *
 * to obtain the best copy available. Nevertheless, items of marginal *
 * reproducibility are often encountered and this affects the quality *
 * of the microfiche and hardcopy reproductions ERIC makes available *
 * via the ERIC Document Reproduction Service (EDRS). EDRS is not *
 * responsible for the quality of the original document. Reproductions *
 * supplied by EDRS are the best that can be made from the original. *

HEALTH EDUCATION FOR SPECIAL CHILDREN

Curriculum Development Committee

U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY.

State Education Department
Division of Drug and Health
Education and Services

Cortland-Madison
Board of Cooperative
Educational Services

Teacher-Writer Team

Primary

Linda Allen
Elaine Faas
Donna Funk
Carole Robinson

Intermediate

Patrick Brodie
Elenna Catalano
Mary Beth Claps
Daniel Funk
Elizabeth Savino
Genevieve Wingate

Secondary

Elvira Brundage
Ann Derr
Elizabeth Hannon
Edward Mueller
Arthur Renschler

Trainer-Writer Team

Janice Allis	David Jacobsen
Anne Brackett	Thomas Murphy
Jeanette Dippo	Nancy Struve

Program Coordinator/Curriculum Editor: Jeanette Dippo
BOCES Health Education Coordinator

Printed by: Graphics Department
Cortland-Madison BOCES

ED123848

EC090202

BOARD OF COOPERATIVE EDUCATIONAL SERVICES

McEVOY EDUCATIONAL CENTER
CLINTON AVENUE EXTENSION
CORTLAND, NEW YORK 13045

Dear Special Educators,

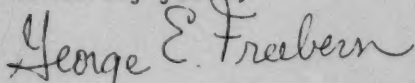
A comprehensive health curriculum is a must in the education of exceptional children. Excepting the three "R's", health is probably the most functional of the skills we can attempt to teach special children. Through coordinated efforts, from the primary level to the high school level, proper habits and attitudes can be developed.

When this curriculum guide is implemented, with the vigor characteristic of the Special Educators in our county, there is no doubt that this guide will help provide improved health education in our county and serve as a source of continuous and sequential health education planning. The teachers, however, who employ the guide in their everyday instruction will give the curriculum its ultimate test.

We appreciate the cooperation and coordination that has taken place to make the health curriculum a vital part of the Special Education program in Cortland County. The format in which the curriculum is presented is most useful and provides many ideas to teach content.

It is only through evaluation by those in the field that enables any curriculum to be fully and successfully implemented. Please feel free to contact us if you have any concerns, questions, or suggestions for improvement of the "Health Education for Special Children." This curriculum is a good beginning, but only a beginning to be refined as dictated by the experience of the teachers who utilize it.

Sincerely yours,



George E. Freebern, Director
Special Education

Table of Contents

Title Page.....	i
Curriculum Development Committee.....	ii
Superintendent's Message.....	iii
Table of Contents.....	iv
Forward.....	v
Introduction.....	vi
Statement of Philosophy.....	vii
Implementation.....	viii
Curriculum Overview.....	ix
Content Overview.....	xi
Nutrition.....	1
Sensory Perception.....	11
Dental Health.....	16
Health Status and Disease Prevention and Cure.....	24
Drugs, Tobacco and Alcohol.....	37
Mental Health.....	67
Family Life.....	77
Consumer, Community, Environmental and Public Health.....	88
Safety and First Aid.....	106

Forward

Health Education For Special Children is the culmination of workshops funded by the Division of Drug and Health Education and Services, State Education Department, and sponsored by the Cortland-Madison BOCES. It reflects the concerted efforts of many persons. The knowledge and expertise of the individual curriculum developers/writers are most worthy of recognition.

This health curriculum guide for special education students is an outgrowth of the health education guides which were developed during the summer of 1974 for use in regular public school classes within this BOCES district.

The eventual mainstreaming of some handicapped children helped to govern much of the material included. Therefore, the activities in each unit were varied enough to provide for individual differences among pupils. The result has been that the content of the units written specifically for emotionally disturbed or learning disabled children, and educable mentally handicapped children was able to follow quite closely the content of the original guides. References should be made to the original guides, therefore, for additional related activities.

To the writing team's knowledge, this is the first comprehensive curriculum created with the special child in mind. It will provide the teacher with many ideas and resources. However, there is always room for modification and suggestions for improvement, any are welcomed.

Introduction

The specific goals of a health education program can be as many and varied as life itself. However, optimal health is dependent upon the interactions of knowledge, attitudes and behavior. The health education program should establish an approach to concepts, generalizations, understandings, facts, values and applications, basic skills, and decision-making processes which can serve as keys to good physical, mental, social, emotional, and spiritual well-being. All participants in the school health education program, including teachers and administrators as well as students, should be assisted in working towards:

1. Acquiring an understanding of his own physical, mental and social health.
2. Developing responsibility toward his own and community health.
3. Acquiring an understanding that the goals of good health result from individual practices and maintenance of those mental, physical, and social habits selected as desirable and good by society and the individual.
4. Acquiring an appreciation of the value of a healthful life.
5. Encouraging systematic development of individual human potential for health, growth and happiness.

These are certain elements necessary for success of a health education program that cannot be written into a curriculum guide. These essential elements come from within the individuals responsible for implementing and carrying out the program:

1. Commitment on the part of administrators and teaching staff to a belief in the value and potential of health education is most important.
2. In view of the definition of health in terms of its psychological, physiological, sociological aspects, there needs to be, more than in any other curriculum area, a willingness to work together and lend support in setting up and maintaining a good school health education program - one which is prevention-oriented and clearly above and beyond the minimal requirements for drug and health education as delineated in the Rules of the Board of Regents and the Regulations of the Commissioner of Education.
3. It is possible to improve the classroom experiences of health education students through sincere desire by all directly involved to utilize to the greatest advantage appropriate resources (including those of a human nature) and/or other quality teaching aids, materials and devices which are made available.
4. Support for the concept of student participation and involvement in their own learning is a most meaningful part of a sound health education program. Provision should be made for a diversity of learning approaches including extension of learning into multi-community settings.

A Statement on Philosophy of the School Health Program

Health is an integral aspect of every phase of life. Without health man cannot function effectively in his society. Health can, therefore, be considered not only biological, but psychological and sociological well-being as well.

The School Health Program, which includes all functions and services designed to promote the optimum health in each child, is a flexible blueprint aimed at assisting students in developing into independent, responsible adults. It would seem that no one, be it student or adult, can be independent and responsible unless he is equipped with the health necessary to be so; health that is, in part, imparted by knowledge and understanding of the forces which is for this reason that, with the guidance of State legislation and the local Board of Education, the School Health Program endeavors to supplement parental responsibility in this realm. The effective and flexible program must originate with the needs and interests of the individual. From this basis, it should continue to meet the needs of the family, community, nation, and the world...

As a result of imparted knowledge, understandings, and good health habits and attitudes, we would hope to kindle, promote, and help each child achieve a state of physical, social, emotional, intellectual and spiritual well-being that would be conducive to such academic learning as the student was capable of acquiring. In short, we aim at helping the student to "become all he is capable of being." This is based on the assumption that health, not being an end in itself, is a means to an end ---- a happy, fruitful life.

Implementation of a School Health Program

Whatever the organizational plan, the only significant test of its worthwhileness is the effect which it brings to bear on the total educational program or the opportunity which it affords children to learn.

When the School Health Program is being established or adjusted, certain guidelines or basic principles, if adhered to, will help to insure its success. These are as follows.

1. Develop it gradually rather than superimposing it abruptly.
2. Though idealistic in its announced goals, it is realistic in its current performance.
3. It fosters continuous communication between all school staff members.
4. Special facilities are at its disposal.
5. It is interwoven with the instructional program.
6. It brings its services to every student, not just to those in distress.
7. It plays an important role in the school's public relations program.
8. It is constantly engaged in a process of self-examination.
9. It insures a balance in services it offers pupils.

Once the program is ready to be established, there are certain general fundamentals which should be considered in its administration:

1. There should be centralized control to assure efficient and effective functioning of the total program.
2. Adequate budgeting of finances to provide necessary salaries, supplies, and equipment should be carried out.
3. There needs to be proper coordination of various divisions, departments, and areas.
4. Selection of teachers and health specialists should be based on the best qualifications for the particular school and community.
5. Allotment of sufficient time in the school curriculum for the health program to function effectively is a necessity.
6. Definite assignment of duties and responsibilities to teachers, health specialists, and administrative assistants is a must.
7. Organization of a health teaching program should be on a school-wide basis.
8. Consideration of legal provisions, state and local laws, and requirements pertaining to and affecting the School Health Program and pertaining to special children should not be neglected.
9. Provisions should be made for assuring maintenance of the school plant and facilities in a sanitary and hygienic manner.
10. Special measures are necessary to recognize and provide for individual physical, mental, emotional, and social differences of students.
11. Methods and plans for safeguarding the health of teachers, as well as of students, should be an integral part of the plan.
12. There should be constant and thorough evaluation of the total School Health Program.

Curriculum Overview

One area of study which is often lacking for special education students is that of health education.

The overall goal of this curriculum is to assist in developing individuals with the competency to function well in society and the ability to cope with the social, physical, emotional, intellectual, and spiritual dimensions of man. This goal seeks to aid in the discovery of self in relation to others in society and in the world and to implement the concept that decision-making is best where each individual has adequate information and experiences upon which to base his decisions. Decision-making is a cumulative process which results from a growing awareness of self and a growing awareness of the healthful alternatives which the health education process provides.

This guide is a vehicle for preventive education, acknowledging that a primary task of the school is development of positive self-concepts, helping students obtain control over their own lives, and maximizing their health potentialities. It offers a curriculum which helps each individual examine the meaning and value he desires health to have in his life and the life style he envisions necessary to implement his desires and values. It represents curriculum designed to fulfill personal needs and interests based on varied ability levels via being meaningful and relevant to students preparing to live healthful, productive and rewarding lives.

This rationale is based on concepts which provide for increasing levels of information and experiences related to physical, psychological, and social development as grade level increases. There is decreasing breadth, but greater concentration of information and experiences in various areas of health education and maturity levels increase providing a continuous and cumulative effect rather than a disjointed one.

Health Education should:

1. Represent a major part of a life-long educational process.
2. Exist for benefit of all students.
3. Represent a process that begins informally during pre-kindergarten years and continues throughout adulthood.
4. Involve total school/community efforts.
5. By its basic nature, revolve around developing a meaningful, satisfying and healthy life.

This particular guide represents one level of a planned, unified and comprehensive K-12 health education program for special children designed to:

1. Meet the needs of all students.
2. Be sequential, building on developmental tasks at each level.
3. Be flexible in order to facilitate implementation on a county-wide basis.
4. Include objectives and learning experiences for assisting in the decision-making process.
5. Be easily updated, due to its format, via replacement of pages upon their obsolescence.

Each topical area or unit consists of five basic parts:

1. Overview and Objectives
2. Concepts
3. Content Outline
4. Learning and Evaluative Activities
5. Resources

The unit overview gives a brief orientation to the philosophy regarding the unit. The outline of objectives reflects the cognitive, affective and psychomotor domains. They signify specific ways students should be able to think, feel, and act, after completion of the unit of study.

The concepts and supporting content outlines provide necessary background material for behavioral change. Coordinated with these are suggested resources and learning and evaluative activities from which student experiences may be selected in order to promote desired behavioral changes. These resources are not only for students, but also include materials which are too difficult for students' personal use, but valuable for teachers in the preparation of lesson plans.

Included among the resources are films which are usually listed with a reference to their Cortland-Madison BOCES number. To locate the producer/distributor, the teacher should consult the NIGEM Index of Films, which is available in most BOCES buildings or other film centers. Of course, any film or material must be previewed and carefully integrated with classroom activities in order to be of maximum effectiveness.

The curriculum guide contained herein is specifically designed to be descriptive and adaptable in order to allow for variations in school systems, teachers, classes and special education students. The teacher may not be able to expect students with certain disabilities to be able to spell correctly or write explanations, if at all, but by repetition as required the student should be able to learn eventually to pronounce and understand the important vocabulary words. The interaction of content and process in health education should lead to the development of problem-solving behavior which can be used flexibly and in a variety of situations. The goal, therefore, is to move as much as possible beyond fragmented and memorized information to the level where concepts are developed and internalized. To this end the teacher may want to draw upon activities from one unit to reinforce the objectives of another, or to use these activities as a point of departure in devising new ones.

Content Overview

Teachers need to be very flexible and ready to adapt the learning experiences to individual learning capabilities. Some of the students who may read and write very poorly can be expected to be very curious and verbalize fairly well regarding health topics presented.

Certain special education students, such as the educable mentally retarded and the trainable mentally retarded, may have very little ability to transfer learning. Words may have to be explained repeatedly in terms they can understand. Any audio-visual materials employed must be carefully screened prior to use and discussed after use to make certain the pupils understand the vocabulary and concepts presented. Emphasis should be placed on learning major concepts not facts that students won't be able to retain. The teaching techniques and extent or depth of coverage of material is governed to a considerable degree by the types and degree of handicaps of the children involved.

Remember that the mentally handicapped child or adult is not very different from any other human being. First, this individual is a human being, and only secondly does he have a handicap. His basic needs are as great as anyone else's, but his difficulties in learning, relating and coping may be greater. His behavioral manifestations may be inappropriate and because of this so-called negative behavior, his problems are great.

Teaching anything to those with learning problems requires special skills and understanding. Their needs are often more individually demanding; and it is usually more difficult to communicate with them. In preparing this guide, the writers were especially conscious of the tremendous range of special education students' abilities to learn. There are handicapped individuals who are barely distinguishable from the so-called "normal" members of society. And there are those whose handicaps are so extreme that they may never learn to perform simple tasks of self-care such as eating or dressing. The writers of this guide assume that the special education teachers using it already have an understanding of the similarities and differences of their students compared to those students without learning problems. Therefore, any reference to types and/or classifications of handicaps is generally avoided.

NUTRITION

OVERVIEW

The older mentally retarded child may be headed for independence even sooner than his college-bound counterpart. Instead of going off to a dormitory where meals are provided, he may take a room or rent an apartment where he becomes responsible for his own good nutrition. It is essential, then, that he acquire not only the background information to make this possible, but the practical skills as well.

Does he know how to measure with accuracy volumes such as teaspoon and cup? Does he know how to preserve food, like milk which needs refrigeration? Can he process food, like pork which must be thoroughly cooked before it is eaten? Fruit which may have been sprayed with insecticides must always be carefully washed.

Pregnancy makes demands on a woman's nutrition which have not been discussed before. Students with some basic understanding of foods and their values will find it easier to follow the doctor's recommended diet during pregnancy than those who do not.

The changing status of the family with working mothers and parental sharing of household responsibilities indicates a necessity for everyone who has influence on children's eating habits to be aware of the implications of good eating patterns. Nutrition education affects not only the children of today, but their children of tomorrow.

An important concept that should be emphasized is that nutritious meals can be at least as economical as more extravagant meals. The older mentally retarded child should be informed of the various community and governmental services that serve as a adjunct to relief and welfare programs.

OBJECTIVES

Suggested Pupil Outcomes:

1. Compare the relationship between the foods eaten and the body's health, growth and development.
2. Develop nutritional practices which enable one to experience satisfactory patterns of growth and development.
3. Analyze current trends and events in society which affect nutritional status and behavior.

4. Relate different eating patterns to circumstances of living.
5. Differentiate among varieties, forms and sources of food.
6. Critically evaluates facts, fallacies and beliefs about foods and food facts.
7. Can plan and understand the preparation of nutritious meals and snacks.
8. Discovers how behavior while eating can influence body processes in both a negative and positive manner.
9. Recognizes the growing problems of obesity at all age levels.
10. Understands and can apply the modifications of diet that are necessary depending on the age, sex, heredity, activity and state of health of the individual.
11. Relates how temporary and long standing health problems can result from improper food selection and eating patterns.
12. Realize the importance of modern day methods for handling and preserving foods.
13. Analyze relationships between nutritional status and disease.
14. Understand that we all have a "diet".

MAJOR CONCEPTS

1. One's daily diet should be planned each day to include foods which produce sufficient amounts of nutrients and calories.
2. Food choices need to be distributed wisely among meals and snacks.
3. Good nutrition is the individual's basic responsibility.
4. Patterns of selecting and eating foods are determined by many factors - cultural, economic, mental, physical and social.
5. Intelligent choices need to be made about foods, food fads and sensational claims.
6. Some prevalent physiological conditions can be prevented and treated by good nutrition.
7. Our selection of food depends upon many different factors.
8. Work efficiency depends upon adequate food intake.
9. Many agencies at both the local and national levels help to protect against unsafe food practices.
10. One's feelings and emotions affect digestion of food.
11. Some foods do more for us than others.

LEARNING AND EVALUATIVE ACTIVITIES

1. Role-play ways to encourage a relaxed mealtime and ways to create tension during mealtime.
2. List foods you dislike and find substitute foods supplying same nutritional value.
3. Discuss radio and television advertisements and family food likes.
4. Discuss food fads and the problem of getting reliable information. Discuss how to tell the difference between food facts and misinformation.
5. Expose a variety of foods to the air at room temperature. Note how long it takes for each kind of food to spoil. Discuss how these foods are "kept" when they are transported and when they are in stores. Identify the signs of food spoilage: odor, change in texture, change in appearance and color, and change in taste.
6. Observe under a microscope the growth of bacteria or mold that appears on spoiled food.
7. Invite a home economist to speak to the class about preserving and enriching food.
8. Make a bulletin board display of reasons why we eat (growth, energy, feel better, etc.).
9. Plan a Spanish menu, Italian menu, French menu, etc.
10. Make six different colored blocks of construction paper. Designate each one as vitamin, fat, carbohydrate, water, etc. Build different foods with the blocks. Make comparisons.
11. Collect menus from cafeteria for a week and evaluate them for their basic four contributions.
12. Prepare charts or posters showing an infant, growing child, construction worker, a mother, a grandmother, etc. Discuss their individual food needs.
13. Organize a panel to discuss the values of enriching foods (milk, bread, cereals, juices.)
14. Test nutritional understanding by the following: two menus, each including favorite teenage foods - one balanced, one unbalanced. Have students choose which is nutritionally adequate and explain why.
15. Project a magazine ad and have students evaluate the emotional appeal and mis-advertising concepts.

16. Construct a bulletin board display showing the relationship of nutrition to heart disease.
17. List and describe family and cultural eating habits. Explain the relationship of these habits to growth and development. Oral report to class.
18. Have students "price shop" in a supermarket for a week's supply of food for a family of 5. Report findings to class orally.
19. Reports on types of diseases that are transmitted by foods and how such problems may be overcome.
20. Analyze TV commercials on foods, relating the approach used and to whom the appeal is made.
21. Crossword puzzle on nutritional terminology.
22. Using local newspapers and supermarket flyers, have students make up a nutrition notebook, show pictures of different types of foods (groups) - also price fluctuations leads to study of growing seasons, math, etc.
23. Play "Know Your Foods" - blindfold subjects, taste samples from foods of different groups. (1 point for right food, 2 points for right group.)
24. Locate pictures of 3 foods from each of the four basic food groups.
25. Make 3 posters showing some rules for good, nutritious diets.
26. Look up the words (carbohydrate, fat, vitamin, mineral, protein) in the dictionary. Write the meaning of them and give an example of a food they are found in.

CONTENT OUTLINE

- I. Functions of Foods in the Body
 - A. Building body tissues and muscles
 - B. Preventing disease
 - C. Building strong teeth and bones
 - D. Providing energy and heat
 - E. Aiding in elimination
- II. Nutrients and Their Functions
 - A. Proteins
 - 1. Build and repair tissues
 - 2. Supply heat and energy
 - B. Carbohydrates
 - 1. Supply heat
 - 2. Provide energy
 - C. Fats
 - 1. Supply heat
 - 2. Provide energy
 - D. Vitamins
 - 1. Regulate body processes
 - 2. Maintain health (prevent deficiency diseases)
 - E. Minerals
 - 1. Build and repair body tissues
 - 2. Regulate body processes
 - F. Water
 - 1. Regulate body processes
 - 2. Build body tissue
- III. Sources of Nutrients
 - A. Protein
 - 1. Milk
 - 2. Meat group
 - B. Carbohydrates
 - 1. Breads and cereals
 - 2. Vegetables and fruits
 - 3. Sweets
 - C. Fats
 - 1. Butter and margarine
 - 2. Oils
 - D. Vitamins and minerals
 - 1. In all food groups
 - 2. In varying amounts
- IV. Planning for Good Nutrition
 - A. Selecting from the Basic Four food groups for simple meal planning
 - B. Good snacks versus empty calories
 - C. Comparing nutritive value of foods and their prices
 - D. Type A School Lunch Program

- V. Proper Care of Foods (keeping food and water clean and free from harmful "germs")
 - A. Processing to prevent spoiling
 - 1. Canning
 - 2. Drying
 - 3. Preserving
 - 4. Freezing
 - 5. Refrigeration
 - B. Desirable practices in preparing, serving and storing foods
- VI. Reasons for Eating
 - A. Maintain life
 - B. Promote growth
 - C. Keep healthy
 - D. Satisfy hunger
 - E. Satisfy habit
 - F. Enjoyment
- VII. Digestion
 - A. Basic structure and function of digestive tract
 - 1. Mouth
 - 2. Stomach
 - 3. Small and large intestines
 - B. Basic structure and function of accessory organs
 - 1. Pancreas
 - 2. Liver
 - 3. Gall bladder
- VIII. Influence on Environment and Custom on What We Eat
- IX. Nutrition as a Person's Individual Basic Responsibility
 - A. Teenager's eating habits
 - B. Recent studies of teenager's nutritional status
 - C. Nutritional concerns of teenagers
- X. The Far-reaching Effect Foods Eaten Today Have on the Body Physically and Emotionally
 - A. Nutrients for energy, growth and repair
 - B. Emotional problems related to diet
 - 1. Over-eating, overweight, underweight
 - 2. Skin problems of adolescence
 - C. Physical performance
 - D. Adequate rest
- XI. The Individual's Responsibility for Making Mealtime Pleasant and Harmonious
 - A. Importance of togetherness at family meals
 - B. Pleasant conversations and surroundings
 - C. Good table manners

XII. Food Choices Need to be Distributed Wisely Among Meals and Snacks

- A. Good snacks, bad snacks
- B. Intelligent choices about foods
- C. Vulnerability to food fads
- D. Food choice according to food groups

XIII. Government Action to Protect from Unsafe Food Practices

- A. Federal Food and Drug Administration
- B. State agencies
- C. Local inspection of eating establishments

RESOURCES

Books:

Food and Nutrition, W.H. Sebrill and JJ. Haggerty; The Life Science Library, Time Inc., 613.2

S

Introductory Nutrition, Helen Guthrie; 2nd Edition, C.V. Mosby Company, St. Louis, 1971

The Medicine Show, Consumer's Union, Part II (Chapters 13-17) - Food faddism and quackery

Natural Food, Barbara Fenton; 1973

The Nuts Among The Berries, Ballantine Books, Inc., Discusses food faddism and nutritional quackery

Films:

Balance Your Diet for Health and Appearance, BOCES #831-25, 11 minutes

Digestion and the Foods We Eat, BOCES #831-259, 9 minutes

Digestion in Our Bodies, BOCES #831-47, 11 minutes

Eat, Drink and Be Wary, BOCES #832-413, 20 minutes

Food For Life, BOCES #832-198, 21 minutes

Food Platform, BOCES #832-346, 20 minutes

I Am Joe's Stomach, BOCES (video cassette), 26 minutes

Nutritional Quackery, BOCES #832-43, 22 minutes

Pamphlets:

Heart Association
Metropolitan Insurance Company

Cooperative Extension Service
Nutritional Facts About Foods (Free)
Perspectives on Overweight (Free)
When Is Food Safe? (Free)

Metropolitan Life
Four Steps to Weight Control (Free)
The Big Stretch (Free)

HENs:

Nutrition Materials, BOCES #HN-19

Nutrition Menus, BOCES #HN-20

Charts:

Nutrition: Carbohydrates, BOCES #CH-1

Nutrition: Protein, BOCES #CH-2

SENSORY PERCEPTION

Overview

For those students who will be terminating their formal education within one or two years, an understanding of the importance of the proper care of the sense organs is essential.

Most educable, mentally retarded students will find employment in which there is a definite need for sensory acuity, notwithstanding the fact that general health and safety also depend on this.

Because the subject of sensory perception is treated with more emphasis at earlier levels, this senior high program will serve mainly as review and expansion.

Objectives

1. Identify the sense organs.
2. Value the importance of proper care of the sense organs.
3. Identify the importance of vision and hearing for normal daily functioning.
4. Identify rules for protecting the sense organs from injury and infection.
5. Analyze the general structure and function of the sense organs.
6. Value the importance of periodic testing for vision and hearing.
7. Explain the function of the sense organs.
8. Analyze common sensual disorders.
9. Become aware of the medical and para-medical personnel and services available to assist the individual.

Major Concepts

1. There are five main or special senses - seeing, hearing, smelling, touching, and tasting.
2. Sensory nerves carry messages from the five main senses to special centers in the brain.
3. We see when the eyes receive light and send light messages to the brain.
4. Sound is produced by something vibrating.
5. Eyeglasses can help correct near-sightedness, far-sightedness, and astigmatism.
6. The sense of touch is actually a group of senses that perceive heat, cold, pressure, pain, and so on.
7. An understanding of the structure and function of the sense organs develops an awareness of their importance to the individual.
8. Ignorance of proper functioning of the senses may be detrimental to the well-being of the individual.

Content Outline

- I. Sensory Perceptions and Good General Health
 - A. Sleep and rest
 - B. Nourishing foods
 - C. Exercise
 - D. Protection of our senses
 - E. Medical check-ups
- II. The Eye as a Receptor
 - A. Brief anatomy and physiology
 - B. Visual problems
 1. Refractive errors
 - a. Nearsightedness
 - b. Farsightedness
 - c. Astigmatism
 2. Strabismus
 3. Cataracts
 4. Glaucoma
 5. Squint
 6. Amblyopia
 7. Conjunctivitis
 8. Blindness
 - C. Common injuries to the eye
 1. Corneal laceration
 2. Contact with chemicals
 3. Use of explosives
 4. Direct exposure to the sun and lights
 - D. Medical and para-medical specialists
 1. Ophthalmologist (oculist)
 2. Optician
 3. Optometrist
- III. The Ear as a Collector and Conductor of Sound
 - A. Brief anatomy and physiology
 - B. Auditory problems
 1. Ear infections
 2. Sound conduction problems
 3. Deafness
 4. Motion sickness
 5. Vertigo
 - C. Causes of injuries to the ear
 1. Noise
 2. Blows
 3. Sharp objects
 - D. Medical and para-medical personnel
 1. Otologist
 2. Otolaryngologist
 3. Audiologist
- IV. Other Senses
 - A. Olfactory (smell)
 - B. Taste
 - C. Touch

Learning and Evaluative Activities

1. Demonstrate how sound travels by securing a tuning fork. Strike it gently and quickly place it in a pan of water so that the ends touch the water. It will make a humming sound because the prongs vibrate. The water will move with the vibration.
2. Give some examples of loss of balance (swinging, sudden ascent).
3. Blindfold a student, have him hold his nose and try to differentiate between a potato and an apple.
4. Put the names of several occupations in a box. Have the children pick out one of these and relate the importance of the different senses to the occupation, i.e. pilot, telephone wirer, signalman, coffee taster.
5. Blindfold a student and have him identify the area from which clicking sounds are coming.
6. The rock opera TOMMY can be used to emphasize why the sense of touch is so important. Various pieces can be played to illustrate Tommy's feelings as a child, and in later life. Selections which are especially good are: "Christmas", "There's a Doctor", and "Go to the Mirror."
7. Discuss how one's life would be changed without various senses. What happens to another sense if one is lost?
8. Make illustrations of some of the visual symbols used in road signs; emphasize differences in colors and shapes.

Resources

Books:

- Junior Science Book of Sound, Anderson, Dorothy S. 534
A
- Light and Vision, Mueller, Conrad G. & Mac, Rudolph 612
M
- Sound and Hearing, Stevens, S. S. & Warshofsky, Fred 152.1
S
- What Is Sound, Reuben, Gabriel H. 534
R

Films:

- Cities in Crisis, BOCES #832-70
- Communications: A First Film, BOCES #831-289
- The Eye, BOCES (video cassette), 11 minutes
- The Eye Hears, The Ear Sees, BOCES #833-73 & #833-74
- Gateways to the Mind, BOCES #833-2011, 60 minutes
- Human Ear, BOCES #831-341, 9 minutes
- Inner Ear, BOCES (video cassette), 10 minutes
- Introduction to Visual Illusion, BOCES #832-370, 17 minutes
- Kevin, BOCES #842-9, 16 minutes
- Listening, BOCES #832-97, 14 minutes
- Philip and the White Colt, BOCES #833-134, 23 minutes
- Thousand Eyes, A, BOCES #831-315, 10 minutes

HEN:

- Sensory Perception Materials, BOCES #HN-21

DENTAL HEALTH

OVERVIEW

Not only do teeth enhance the appearance, they also affect normal speech, influence facial expression and begin the mechanical phase of digestion. Yet, the lack of understanding on the part of the individual frequently results in tooth decay and other dental diseases. Since dental health affects the general health and social adjustment of a person throughout his lifetime, the student should develop good oral hygiene practices in school.

The older mentally handicapped student will undoubtedly have been told many times in the past the procedures he ought to be following for good dental health. Whether he observes these procedures or not, a repetition is guaranteed to lose his interest.

The student should be encouraged to assume some responsibility for his own dental health. A personal involvement in the curriculum could foster this attitude.

OBJECTIVES

Suggested Pupil Outcomes:

1. Relate dental health to general health.
2. Describe how dental health is a necessary requirement for a good appearance.
3. Utilize sound protective measures against accidents to oral structures.
4. Identify those practices which affect dental health.
5. Describe the functional characteristics of the oral structure.
6. Value the role of proper diet in the development and maintenance of dental health.
7. Analyze the characteristics of oral structures.
8. Understand the structure and functions of the tooth to determine the value of dental care.

9. Evaluate the factors that contribute to the process of tooth decay.
10. Investigate the diseases associated with poor hygiene.
11. Interpret relationships among proper oral practices, appearance of the teeth and mouth, emotional effects on the individual, and social approval and acceptance of others.

MAJOR CONCEPTS

1. Teeth have structures to serve specific purposes.
2. The teeth are calcified structures fixed in bony sockets in the upper and lower jaws.
3. Our teeth help us to chew food for good health, speak clearly, look attractive and have proper facial form.
4. Each tooth has a name which indicates its special job.
5. Food habits influence dental health.
6. Caries usually begin with a small hole, usually in a fissure or flaw of a tooth, in an area where food may be lodged, or where it is difficult to remove food by brushing.
7. Tooth decay is usually caused by acids forming in the mouth.
8. Diseases of the gums and other supporting structures of the teeth are called periodontal diseases.
9. Preventive measures for periodontal diseases include proper tooth care, a well-balanced diet, and regular visits to the dentist.
10. Missing teeth may cause other teeth to shift positions, causing an interference with the chewing process and destroying the normal symmetry of the face and jaw.
11. Daily personal care promotes dental health.
12. Dental supervision is important in controlling dental disorders.
13. Oral structures were meant to serve throughout a lifetime.
14. While the anatomy for each tooth is the same, the function that each tooth performs is dependent upon its location in the mouth.
15. Personal oral health practices are affected by a variety of conflicting intrinsic and extrinsic factors.

CONTENT OUTLINE

- I. How a Tooth Grows and Develops
 - A. A look at the structure of a tooth
 1. Root
 2. Crown
 3. Neck
 - B. Let's look at the kinds of teeth and their jobs
 1. Types
 - a. Central incisors
 - b. Lateral incisors
 - c. Cuspids
 - d. Bicuspid
 - e. Molars
 2. Functions
 - C. Importance of teeth
 1. Nutrition
 2. Appearance
- II. Problems Do Arise!
 - A. Malocclusion
 1. Definition - What it is
 2. Causes - What its causes are
 3. Treatment - How it can be treated
 4. Prevention - What you can do to prevent it
 - B. Dental caries
 1. Definition - What they are
 2. Causes - How they develop
 - a. Factors in the incidence
 1. Absence of fluoride
 2. Females - more prone
 3. Some teeth surfaces more susceptible
 4. Refined diet
 - b. Contributive factors in tooth decay
 1. Developmental and systemic disturbances
 2. Dental plaque
 3. Mouth bacteria
 4. Acids
 5. Saliva
 6. Food
 7. Irregular alignment
 8. Gum disorders
 9. Poor habits
 10. Emotional disturbance
 11. Smoking
 - C. Periodontal disease
 1. Definition - What it is
 2. Some common periodontal diseases
 - a. Gingivitis
 - b. Vincent's infection - trench mouth
 - c. Periodontitis
 3. Types of treatment available
 4. Key to prevention

- II. D. Traumatic injury
 - 1. Common causes
 - 2. How various injuries are corrected/treated
- E. Missing teeth
 - 1. Most common causes
 - 2. Effects on other teeth
 - 3. Treatment varies
 - a. Fixed partial denture
 - b. Removable partial denture
 - 4. Preventive procedures

III. Proper Care of Teeth

- 1. Healthful diet
 - a. Foods necessary for maintaining oral health
 - b. Vitamins and minerals needed for good dental health
 - c. Foods that are detrimental to good dental health
- 2. Maintaining oral hygiene
 - a. Proper brushing
 - b. Massaging
 - c. Rinsing the mouth
 - d. Use of dental tape or floss
 - e. Prevention of injuries to the teeth
 - f. Good dental health habits
 - g. Fluoridation
- E. Regular visits to dentist

IV. Kinds of Dental Personnel

- A. Dentist
- B. Orthodontist
- C. Oral Surgeon
- D. Endodontist
- E. Dental Hygienist

LEARNING AND EVALUATIVE ACTIVITIES

1. Discuss why we need teeth. (Smile, appearance, chewing, talking.)
2. Discuss and diagram a tooth, showing and labeling each part and naming its function.
3. Discuss the types of teeth various animals have and relate the kind of teeth they have to the kind of food they eat.
4. Show how teeth aid in digestion by experimenting with sugar and water. Put a whole lump of sugar in one glass of water and a crushed lump in another glass. Stir each and observe which dissolves more quickly; cut or crushed food can be changed more easily into liquid form so that our bodies can digest it.
5. Estimate the cost of the "sweet tooth" habit, and compare it with the estimated cost of more wholesome food.
6. Discuss the value of certain foods such as apples, celery, carrots, as tooth cleaners.
7. To show that acid will weaken substances containing calcium (such as tooth enamel) place a whole egg in a bowl of vinegar (acetic acid) for about 24 hours. The egg shell should become soft as the vinegar decalcifies the shell.
8. List activities which might damage enamel (biting hard objects, opening bobby pins, cracking nuts, chewing pencils, chewing ice, chewing hard candy, pumping drinking fountain, falling off bicycles or skates, etc.).
9. Discuss malformation of teeth and how teeth depend on each other for alignment.
10. Discuss the decay process through posters on bulletin boards..
11. Make paraffin models. Bite on paraffin which has been slightly warmed. Fill paraffin model with plaster of paris. Illustrate occlusion.
12. Demonstrate proper ways to brush teeth and discuss time for brushing them.
13. Discuss the value of the use of toothpastes or toothpowders.
14. Bring in toothpaste advertising. Compare and evaluate.
15. Survey lunchroom menus for a week. Record foods containing nutrients for dental health and foods that are nature's "toothbrushes".

16. Diagram and discuss teeth showing progress of decay.
17. List habits which may lead to malocclusion.
18. Discuss job possibilities of two applicants with equal qualifications except that one has attractive smile and one has improperly cared for and decayed teeth.
19. Discuss reasons for fear of dentists.
20. Draw and label a picture of a tooth, listing the function of each part.
21. Use dilute acid on a chicken bone to show how excess acid helps to decay teeth.
22. An interesting activity for the entire class is to analyze a mouthwash advertisement. What claims does the ad make? What facts are offered? What does the ad really say? Don't forget to look at the picture that accompanies the advertisement. How is it related to the ad? Do ads for mouthwashes seem to say more than they really do?
23. Do crossword puzzle on vocabulary of dental health.
24. Discuss mouth odor and its affect on job interviews.
25. Using magazines or newspapers, conduct a "beautiful smile" contest. Discuss what it is that makes a smile beautiful.
26. Compare periodic "check-ups for the family automobile to periodic dental check-ups.
27. Discuss advantages of natural teeth as opposed to artificial dentures.

RESOURCES

Books:

Atlas of the Mouth, Maury Massler, Isaac Schour, American Dental Society

Clinical Dental Hygiene, Shailer Peterson, C.V. Mosby Company,
(for teacher reference)

Films:

Dentist in the Classroom, BOCES #832-73, 15 minutes

Teeth, BOCES (video cassette), 12 minutes

Project Teeth, BOCES #832-72, 14 minutes

Filmstrip:

The Teeth, BOCES #401-13

Posters:

American Dental Association
Manufacturers of Toothpaste

HEALTH STATUS AND DISEASE PREVENTION AND CURE

Overview

The student who will be leaving school for total or partial independence and perhaps marriage and parenthood, should be helped to develop an understanding of his responsibilities for disease prevention. For some pupils it is very helpful to discuss specific diseases by name in order to talk about prevention and control. However, with some individuals this is impossible and for many retarded students it should be done with great sensitivity in order that it does not become too threatening.

Now matter how it is introduced, all students need to know that they have some very important responsibilities if they want to minimize the chance of serious illness in themselves and their families:

1. Regular check-ups, usually once a year.
2. Reporting to a doctor immediately any physical change which has been observed, especially if it is related to the warning signs of cancer.
3. Eating properly, getting enough sleep, avoiding harmful chemicals, and being aware of the situations in which accidents may occur.

Through the study of communicable and non-communicable disease control, the student can become a well-informed member of the community who will have confidence in right action and will show his recognition of the obligation he has to protect himself and his family. He/she will then insist that other members of society do likewise.

OBJECTIVES

1. Describe the communicable disease process.
2. Identify man's role in the transmission of disease.
3. Identify fundamental principles of disease prevention.
4. Demonstrate personal habits that will protect oneself and others from communicable disease.
5. Describe basic community efforts to minimize the communicable disease problem and improve health status.
6. Differentiate between communicable and non-communicable disease.
7. Analyze the historical efforts of man to understand and cope with disease.
8. Describe the body's natural defenses against disease. Conclude that immunization prevents and controls some diseases.
9. Analyze the significance of disease prevention and control. Cite examples of the effects of disease on individuals, families, communities, and countries.
10. Demonstrate ways to protect the individual, his family, and the community from disease.
11. Describe the procedures used to supplement the body's natural defenses.
12. Examine major roles and contributions of medical research throughout history to modern day.
13. Emphasize the importance of periodic medical examinations to reduce the incidence, retard the effects of, and prevent premature disability and death from chronic and degenerative diseases.
14. Recognize and list signs and symptoms of chronic and degenerative disease so that early diagnosis and treatment can be obtained.
15. Describe the purpose and use of maintaining personal medical records.
16. Describe the roles of various school health personnel in the total school health program.
17. Relate the role of community health personnel in preventing health problems and improving health status.
18. Define those daily activities which have a positive effect on personal health.

19. Describe how growing and developing occurs unevenly for body parts, systems and functions.
20. Evaluate personal health practices as they relate to health status.
21. Express an awareness of individual factors involved in the spread of VD.

MAJOR CONCEPTS

1. All communicable diseases are caused by infectious agents.
2. There are many kinds of communicable diseases capable of being transmitted from person to person.
3. Many diseases, such as degenerative diseases, which attack man, cannot be transmitted from one person to another.
4. There are many different causes of diseases.
5. Age, sex and heredity sometimes influence an individual's susceptibility to disease.
6. The discovery of microorganisms and the formulation of the germ theory of disease led to the development of new approaches to disease control such as immunology.
7. Some disease control measures are very specific (immunization) while others are very general (sanitation).
8. A variety of organisms are involved in the spread of disease.
9. The vectors of disease are transmitted through air, water, direct contact and congenital infections.
10. There are complex interrelationships involving man, his environment and disease.
11. The interaction of the individual with his environment may contribute to various diseases.
12. Identification and acceptance of known preventive and remedial measures makes it possible to control disease.
13. The body has built-in defense mechanisms to combat disease.
14. The individual is responsible for maintaining good medical practices.
15. There are various health programs available to assist the individual in assuming more responsibility for maintenance of good health.

16. In recent years, the increase in morbidity and mortality rates of the chronic and degenerative diseases has become a major concern as it relates to the welfare of people leading happy and productive lives.
17. Discoveries of the nature of diseases and how to control or prevent them have provided man with a greater opportunity to lead a more efficient and effective life.
18. Knowledge of disease-producing organisms and of the way they are spread has made it possible to develop measures to prevent and control the spread of communicable diseases.
19. V.D., as an infectious disease increasingly prevalent in today's society, needs to be combatted on all fronts.
20. With the cooperation of the individual in seeking early treatment, venereal disease can be diagnosed promptly and treated before permanent damage occurs.
21. Public Health Department is concerned with the health of the entire community.
22. Each of us has the responsibility in the fight against disease.
23. The individual has a definite responsibility for his personal health and fitness.
24. There are many people in the school family who help the student keep well and contribute to his growth and development.
25. Great differences exist in height, weight and body build among children - all of whom may be quite healthy but growing in the way that is right for them.
26. Social, mental and emotional values may be derived from participation in a variety of physical activities.
27. The health examination is valuable in detecting early signs of defects, disease and growth variations.
28. Physical activity should be planned as part of one's daily routine.
29. There is a positive relationship between practicing desirable health practices and body fitness.
30. Sleep, rest, and relaxation prepare the body for work and play.
31. Engaging in hobbies, or changing one's activities helps one to relax.
32. Good body dynamics are important in work and play.
33. Regular bathing removes perspiration, oil, and dirt from skin.
34. Proper care of the nails is important to grooming and the prevention of infection.

CONTENT OUTLINE

- I. Appraising a Person's Health
 - A. Indicators of positive health behavior
 1. Responsibility to self and others
 2. Responsibility of the classroom teacher
 3. Responsibility of the parent
 - B. Personnel interested in the health status of the individual
 1. Health service staff
 - a. Physician
 - b. Nurse-teacher
 - c. Dentist
 - d. Dental hygiene teacher
 2. Other school personnel
 - a. Psychologist
 - b. Guidance counselor
 - c. Speech therapist
 - d. Reading specialist
 - e. Social worker
 - f. Attendance teacher
 - C. Assessment of health status and physical fitness
 1. Health examinations/appraisals
 2. Tests and evaluation
 - a. Vision screening
 - b. Hearing screening
 - c. Dental screening
 - d. Physical fitness tests
 3. Evaluative checklist of daily living activities
- II. Historical Development of Man's Knowledge of Disease
 - A. Early beliefs
 - B. Discovery of microbes
 - C. Health heroes
- III. Organisms Involved in Spreading Disease
 - A. Bacteria
 1. Streptococcus
 2. Staphylococcus
 - B. Virus
 1. Common cold
 2. Influenza
 3. Viral hepatitis
 4. Cold sore
 5. Childhood communicable diseases
 - C. Fungi
 1. Athlete's foot
 2. Ringworm
 - D. Protozoa
 1. Malaria
 2. Amebic dysentery
 - E. Helminths (worms)
 - F. Lice
 1. Head
 2. Body
 3. Pubic (crabs)

- IV. Methods of Transmission of Communicable Diseases
 - A. Direct contact
 - 1. Human waste
 - 2. Nose and throat secretions
 - 3. Other body discharges
 - B. Indirect contact
 - 1. Insect vectors
 - 2. Water
 - 3. Air
 - 4. Soil
 - C. Congenital infections
- V. Body Mechanisms to Combat Disease
 - A. Skin and mucous membrane
 - B. White blood cells
 - C. Antibodies
 - 1. Active immunity
 - 2. Passive immunity
- VI. Venereal Diseases
 - A. Most common types
 - 1. Syphilis
 - a. Cause
 - b. Symptoms
 - c. Complications
 - d. Diagnosis, treatment, prevention
 - 2. Gonorrhea
 - a. Cause
 - b. Symptoms
 - c. Complications
 - d. Diagnosis, treatment, prevention
 - B. Public Health control
 - 1. Cooperation between individual and public health agency
 - 2. Provisions for adequate early diagnosis and treatment
 - 3. Intensive case-finding programs and tracing of contacts
 - 4. Control of patients with V.D. in transmissible stage
 - 5. Health education
- VII. Non-Communicable Diseases
 - A. Cardiovascular
 - B. Cancer
 - C. Arthritis
 - D. Conditions affecting muscles and nervous system
 - 1. Most common
 - a. Cerebral palsy
 - b. Multiple sclerosis
 - c. Epilepsy
 - d. Muscular dystrophy
 - e. Parkinson's disease
 - f. PKU (Phenylketonuria)
 - 2. Detection, diagnosis, treatment, prevention

VIII. Responsibility of the Individual

A. Education

1. Nature of disease
2. Immunizations
3. Various services available for detection and treatment
4. Control and prevention

B. Continuous good physical health

1. Rest
2. Exercise
3. Nutrition

LEARNING AND EVALUATIVE ACTIVITIES

1. Have students devise a checklist for self-evaluation of health. At the end of the unit, have children go over lists again. How would they change it?
2. Have the class develop an inventory of characteristics of a health-educated individual. Include personal living, social relations and relations in the community.
3. Read stories of great Americans who overcame physical handicaps and became an inspiration to others.
4. Discuss the reasons for visits to the physician, dentist, dental hygienist, school nurse and school psychologist.
5. Have the class discuss the topic: "Why the individuals concerned with health services are so important to the individual and the community."
6. Discuss the values of an annual health examination.
7. Display doctor's instruments or pictures of them. Allow pupils to listen to the heart and lungs with stethoscope.
8. Review health practices necessary for good health - correction of defects, avoid injury and disease, proper nutrition, proper habits of sleep and rest, and vigorous physical exercise.
9. Discuss the effect of exercise on the heart, circulation and respiration.
10. Discuss the effect of lack of exercise; muscles are meant to be used; with disuse muscles atrophy.
11. Discuss: "How can people get the exercise they need living in this mechanized society."
12. Discuss questions such as, "What is disease?" "What accomplishments has man made in combatting disease in the past 50 years?"
13. Introduce terms used in discussion of communicable disease:
Susceptibility - the condition for establishment of an infection by invasion of virus or bacteria
Resistance - the condition of lessened susceptibility that may result from immunization, changed nutritional status, and influences of age, sex and heredity.
Infection - the process by which a microbial organism invades and establishes a parasitic relationship with a host.

14. Encourage discussion of pupil's ideas about the problems Man has had to conquer in the war against disease. Explore their knowledge about the work of such "health heroes" of the past as Jenner, Pasteur, and Lister.
15. Examine drops of water (rainwater, river water) under a microscope. Report on types of living organisms found.
16. Stress that the immunity acquired from having a disease is more effective than the protection achieved by vaccines. Naturally acquired immunity lasts longer, often for a lifetime, but having a disease carries with it certain dangers. Thus, measles may have complications that lead to deafness or blindness. The use of vaccines to keep people from having communicable diseases represents a giant step forward in preventive medical care.
17. Invite the class to speculate upon some things communities today need to do to help prevent the spread of communicable diseases and to keep people healthy. You might make a preliminary list of suggestions and keep it for future additions and corrections.
18. Ask pupils to tell what they would look for if they were sanitary inspectors: at a restaurant, at a dairy, at a dairy farm, at a food store.
19. Pupils may wonder why pasteurization is necessary if safety precautions are taken at the dairy farm and en route to the dairy. It is necessary because some milk is still handled under conditions that are not ideal. Improper cooling or inadequate protection against flies, dirt, and droplet infection are among the conditions that may exist. Thus, pasteurization is an essential safeguard, not a substitution for cleanliness.
20. The class might take a trip through a local restaurant or food store at an off-hour. The purpose would be to elicit information about the procedures used for maintaining cleanliness, for preventing food spoilage, and for obtaining certification. If the entire class cannot go, an individual might volunteer to make the trip with his parents and report to the class.
21. To safeguard the health of the public, modern communities use such means as water treatment plants to purify water, as well as waste treatment plants to take care of sewage in sanitary ways; they also use methods of insect and rodent control and air pollution control.

Desalination plants make it possible for some cities in the United States to use water taken from the sea; increasing use may be made of the desalination process.

New scientific knowledge is necessary to improve methods of removing complex industrial wastes from water; many industries are finding ways to use some of their waste materials instead of dumping them into, and polluting, nearby water supplies.

Local health departments cooperate with state departments of public health to insure sanitary methods of food handling.

Slum areas are unsafe and unhealthful, and today's communities are turning attention to urban renewal and improved public housing; the Federal government gives financial aid to communities for urban redevelopment.

The local health department helps take responsibility for checking the spread of diseases and for educating people in the community about healthful ways of living so that they can help prevent communicable diseases.

22. Bacteria Experiment: Show that germs "like" a warm, moist, and dark atmosphere in order to thrive and multiply.
Crush several dried beans.
Place half of the beans in each of two containers. Cover with water. Store one of the containers in a warm, dark place and the other one on the classroom sill. After several days note the results.
Secure two apples. Peel them and place one in a dark, moist warm place; leave the other exposed to the air and sunlight. Note the results in a few days.
23. Discuss ways non-communicable and communicable diseases are alike and different. Make a chart or bulletin board display.
24. Invite a physician or public health authority to discuss the high incidence of V.D.
25. Discussion concerning how students contract athlete's foot in school.
26. Review with pupils some ways of finding out about the local water supply and about what efforts are made to avoid pollution of it: for example, by asking parents, by talking to neighbors, by writing a letter to the city water department for information, by writing to the state public health department, by doing research at the public library, by reading current articles and news items on environmental pollution.
27. Preparation of a "Health and Disease" notebook by each student, or committee.
28. Have students write a list of communicable diseases they have had. Separate them into bacterial, fungal or viral diseases.
29. Have class prepare a "warning sheet" of the various signs of chronic and degenerative diseases, to be duplicated and handed out to parents and other adults.
30. Have students develop a bulletin board display on cardiovascular risk factors.

31. Make five posters that could serve as a warning to people about the spreading of disease germs.
32. Use the encyclopedia to find out information about a communicable disease. Write a short report about the disease and how it is spread.
33. Write a story about a communicable disease that either you, or someone you know, has had. Tell what it was, how you caught it, what happened to you, and whether or not you spread it to someone else.
34. Find at least 10 different pictures which show unsanitary conditions or conditions that would make it easy for disease germs to spread.
35. Imagine that you work for the Public Health Department. Write on a chart some important rules you would want for restaurants and their employees for handling food.
36. You have probably been vaccinated for many different diseases. Check with your parents and see if you can make up a chart showing each disease you were vaccinated against, and the date when you were vaccinated.

RESOURCES

Books:

- Anatomy of the Human Body, Henry Gray, Lea and Fabiger, 1954
- Cold War Against Disease, Lucy Kavalier, 1974
- Control of Communicable Disease in Man, Abram S. Benenson, 11th Edition, 1970
- Germ Free Life, Alvin Silverstein, 1970
- Merck's Manual, School Health Supply
- The Teenager and V.D., Celia Deschin, 1967
- Your Wonderful Body, Robert J. R. Follett; Follett Publishing Company, Chicago, Illinois, 611
- What Is A Human, Melvin L. Alexenberg; Benefic Press, Chicago, Illinois, 1964, 612
- F
A

Films:

- Be Fit and Live, BOCES #832-275, 18 minutes
- Breast Self-Examination, BOCES #832-398, 15 minutes
- Communicable Diseases: They Just Go Around, BOCES #832-288, 18 minutes
- I am Joe's Heart, BOCES (video cassette), 26 minutes
- Run Dick, Run Jane, BOCES #832-219, 20 minutes
- Signals, BOCES #831-393, 4 minutes
- V.D. Attack Plan, BOCES #832-397, 16 minutes
- Vision of Dr. Koch, BOCES #832-185, 21 minutes

Kit:

- Me Now, Hubbard Scientific Company, 2855 Shermer Road, Northbrook, Illinois 60062 (available at Cortland-Madison BOCES)

Filmstrip:

How to Catch a Cold, Walt Disney, Glendale, California 91201, \$3.00

Filmstrips and Cassettes:

Health Heroes Series, BOCES #392-9

Marie Curie

Louis Pasteur

Walter Reed

Florence Nightingale

Articles:

Ashby, Neal, "How to Know When You're Sick", Today's Health,
47:36-39, May 1969

Pamphlets:

Equitable Life Insurance Company, 1285 Avenue of the Americas,
New York, N. Y.

Common Sense About Common Diseases

Protection Against Communicable Diseases

HENS:

Communicable Diseases, BOCES #HN-5

Heart Disease Materials, BOCES #HN-17

DRUGS

Overview

There is a little of the rebel in all of us -- especially when we are growing up! This is especially true of young people who feel resentment about the way society is; and this may apply to handicapped youth who feel that society has been quite critical of them. To be put in a special class may make a student feel alienated, like he is being ostracized for something he can't help.

This feeling is then sometimes reflected in teen-agers' attitudes toward drugs. In addition to demonstrating quite lucidly to those in authority that the young person doesn't care at all about the dictates of the "establishment," the student may feel that drug use makes him look quite sophisticated in the eyes of his peers.

If indeed drug abuse prevention is to become a reality, besides instilling specific knowledges and teaching by example, the teacher of the educable mentally retarded most certainly needs to work constantly to make these pupils feel they are worthwhile individuals and contributions to make to society.

In addition, the use of drugs often fulfills a need which has not been fulfilled any other way. This is a very real aspect which needs to be confronted head-on in this unit.

OBJECTIVES

1. Relate the basic role drugs play in the control of disease and pain.
2. Explain how personal, social, family and environmental forces influence drug use, non-use or abuse.
3. Examine how the media influences the use of over-the-counter drugs.
4. Differentiate between prescription and non-prescription drugs.
5. Differentiate between habituation and addiction.
6. Describe the beneficial uses of drugs.
7. Outline the conditions under which prescription drugs can be sold.
8. Relate how one's emotions and feelings affect decision-making.
9. Recognize that involvement with creative experiences improves one's self-concept and relations with others.
10. Identify a variety of ways that one can express emotions.
11. Relate basic factual information concerning the nature and characteristics of stimulant, depressant, and hallucinogenic substances.
12. Develop an awareness that drugs and household chemicals have proper uses, but that their potentially dangerous nature demands the student's respect.
13. Identify some of the personal problems related to the misuse of dangerous substances.
14. Assess the laws governing drugs.
15. Select safe and effective behavior for solving one's problems.
16. Determine the factors related to community responsibility for the provision of resources in prevention, treatment, and rehabilitation of those suffering from the harmful effects of drugs.
17. Interpret the different illegal and legal uses of the drugs.
18. Describe some of the physical and psychological effects of improperly used drugs and volatile substances - both immediate and long-range.

MAJOR CONCEPTS

1. Drugs, in legal products, are medical tools that may have many benefits when properly used.
2. Drugs and other substances are used for many reasons.
3. Drugs and other substances, if misused, may be harmful.
4. Drugs may be classified according to their effects.
5. Production, distribution, and use of drugs are controlled by law.
6. Individual acceptance of responsibility is essential to the wise use of drugs.
7. A knowledge of drugs - what they are, what their benefits are, and how they should be used - can contribute to the prevention of an actual drug abuse situation.
8. Your future can be significantly affected by some of the decisions which you make early in life.
9. The pre-adolescent and adolescent need to be a member of a group can be a factor in drug abuse.
10. A variety of factors influence the decision - to use/misuse substances capable of modifying behavior.
11. The role of drugs and medicine in the treatment and prevention of disease is a contribution to improved health status of the people of the United States.
12. Life in modern society would be difficult without the benefits of drugs.
13. Various factors enter into the pharmacological action of drugs.
14. Depressant drugs are commonly used in both medical and non-medical situations.
15. Stimulants are drugs which increase the activity of the central nervous system.
16. Hallucinogenic drugs are mind-altering substances which have few known positive benefits to man.
17. Addicting and hallucinogenic drugs cause problems for the individual and society.
18. Narcotic drugs are the oldest group of drugs, both in terms of use and abuse.

Content Outline

- I. Sources and History of Use of Drugs
 - A. Definition of drugs
 - B. Main sources of drugs
 1. Plants
 2. Animals
 3. Minerals
 4. Laboratory
 - C. History of drugs
 1. Discovery
 2. Early experiments
 3. Modern use
 - D. Current research
- II. Terminology
 - A. Potentiation
 - B. Abuse/Misuse
 - C. Dependence
 - D. Tolerance
 - E. Glossary of other related terms
- III. Drug Legislation
 - A. Federal
 - B. State - New York
 - C. Control measures
- IV. Drugs Have Many Uses and Effects
 - A. Effective uses, e.g. relieve pain, prevent disease
 - B. Effects of drugs differ according to various factors
 1. Weight
 2. Sex
 3. Age
 4. Mood
 5. Health status
 - C. Unexpected response
 - D. Side effects
 - E. No response
 - F. Variations in dosage
 - G. Interaction of drugs taken together
 - H. Medicines have a significant relationship to health
 1. Non-essentialness of medicines or drugs for the normal healthy person
 2. Dependence of the effectiveness upon several factors
 - a. The specific health problem
 - b. Promptness of seeking medical care
 - c. Accurate diagnosis
 - d. Suitability of medicine used
 - e. Individual health status
 - f. Accuracy in following directions for taking medicine

- H. 3. All medicines have the potential for benefit or for harm according to their use

V. Prescription and Nonprescription Medicines

A. Prescription medicines

- 1. Criteria, e.g. severity of disease, age, weight
- 2. Where purchased
- 3. Necessity of following directions
- 4. Disposal of left-over medicine
- 5. Examples of medicines available only by prescription
 - a. Anti-infectives
 - b. Vaccines
 - c. Hormones

B. Nonprescription medicines

- 1. Reasons for use
- 2. Label directions
- 3. Examples
 - a. Vitamins
 - b. Laxatives
 - c. Cold remedies
- 4. Precautions to observe when taking nonprescription medicines

VI. Classification of Drugs (Characteristics, Effects, Use/Misuse, Dependence/Treatment)

A. Depressants

- 1. Barbiturates and sedatives
- 2. Tranquilizers
- 3. Alcohol

B. Stimulants

- 1. Amphetamines
- 2. Cocaine
- 3. Caffeine

C. Hallucinogens (Psychedelics)

- 1. Marijuana
- 2. L.S.D.
- 3. Others

D. Deleriants and solvents

- 1. Glue
- 2. Other toxic solvents
 - a. Gasoline
 - b. Ether
 - c. Cleaning components
 - d. Lighter fluid
 - e. Plastic cement
 - f. Various aerosol can products with propellants such as freon
 - g. Paint thinner

E. Narcotics

- 1. Opium
- 2. Morphine
- 3. Heroin
- 4. Codeine

- VI. F. Common chemical substances not always considered as drugs and abuse potential
1. Analgesics - aspirin
 2. Antibiotics - penicillin
 3. Vitamins - "Chocks" to "1-A-Day"
 4. Minerals
 5. Antacids - "Tums"
 6. Antihistamines
 7. Vasoconstrictors
 8. Vasodilators
 9. Muscle relaxants
 10. Hormones
 11. Coagulants
 12. Anti-coagulants
 13. Barbituates and alcohol = potentially deadly combination!
 14. Tobacco

VII. Drug Misuse

- A. Medicines are misused in various ways
1. By sharing medicine without consultation of a doctor
 2. Through self-diagnosis
 3. Use of left-over prescription medicines
 4. Through overdosage - accidental or intentional
 5. Underdosage
- B. Dangers associated with misuse of drugs
1. Tolerance
 2. Development of dependence - psychological, physical
 3. Personality changes - moods, goals, outlook on life
 4. Worsening of original condition
 5. Serious mental disorders
 6. Possible organic damage
 7. Death
- C. Various common household products have an abuse potential that can be harmful
1. Ways of misuse
 - a. Swallowing
 - b. Inhaling
 - c. Injection
 - d. Absorption through the skin
 - e. Substitution - i.e. gasoline to start fire in barbecue pit
 2. Potential consequences of product misuse
 - a. Nausea, vomiting
 - b. Suffocation
 - c. Poisoning
 - d. Organic damage
 - e. Mental damage - temporary or permanent
 - f. Death
- D. Commonly abused drugs most frequently affect the brain and nervous system consequently altering body reactions
1. Stimulate or depress the central nervous system
 2. Induce hallucinations, alter perception and performance

3. Create a state of dependence
4. Alter mood and behavior
- E. Reasons for misuse of drugs
 1. Result of a lingering illness
 2. As a "crutch"
 3. Result of habitual use
 4. Belief that abuse is a sign of maturity or sophistication
 5. Desire for peer acceptance and sociability
 6. Family members do
 7. Curiosity, desire to experiment
 8. Rebellion
 9. Dissatisfaction with self, school, etc.
 10. Because of disappointment
 11. Desire for instant gratification
 12. To avoid facing and solving daily problems
 13. For kicks - excitement
 14. Feeling of hopelessness
 15. Boredom
 16. Accident
 17. Failure to read and follow directions
 18. Lack of knowledge
 19. Dare or challenge
 20. Other
- F. Future effects of drug misuse
 1. Psychological dependence
 2. Physiological dependence
 3. Physiological damage
 4. Possible long-range effects
 5. Possible effects on offspring
- G. Causes of dependence
 1. Accidental
 2. Deliberate
 - a. Neurotic
 - b. Psychopathic
- H. Development of addiction
 1. Pre-addiction mixture
 2. The lives of addicts
 3. Treatment/Withdrawal/Rehabilitation

VIII. Assuming Increasing Responsibility for Personal Health

- A. Part of growing up is becoming independent, responsible for personal health and the health of others
 1. A child must tell adults when he is ill
 2. A doctor's advice must be followed
- B. Good health habits must be established early
 1. For a longer and happier life
 2. As a force in determining choice of work and play
 3. Preventive against the high costs of illness
 4. As a force in determining future plans and successes
- C. Habits develop in several ways
 1. Through motivation
 2. Through conscious effort
 3. Without conscious effort
 4. Through influence of friends and their behavior

- D. Some habits affect health
 - 1. Personal health habits - i.e. eating, exercising, resting
 - 2. Study habits
 - 3. Safety habits
 - 4. Recreational habits
 - 5. Habits of using medicines, drugs, and other substances
- E. Problems of drug abuse may be avoided by
 - 1. Making wise choices based on accurate information
 - 2. Having courage to say "no" to experimenting
 - 3. Knowing and respecting laws
 - 4. Recognizing the hazards of misusing any product
 - 5. Recognizing that healthy individuals do not need regular medication
 - 6. Recognition of everyone's responsibility in the prevention of drug misuse
 - 7. Being informed of agencies that enforce laws
 - 8. Using an ounce of prevention vs. a pound of cure
 - a. Basic needs of the individual
 - b. Satisfying individual needs through socially, physically, and psychologically acceptable routes
 - c. Parents of tomorrow - meeting children's needs from birth through decisions regarding drug use
 - d. A brighter tomorrow - the time it takes a new generation of children to grow up having their needs met at each stage of development

17. Describe constructive, safe ways to show independence -- i.e. help family members.
18. Have pupils develop a list of responsibilities for health which they can assume.
19. Evaluate personal habits to determine their effects upon total health.

LEARNING AND EVALUATIVE ACTIVITIES

1. Have students construct a "word list" of both medical and slang terms relating to drug use and abuse.
2. Have students construct a chart depicting habit-forming, addicting, or unclassified drugs. Chart to include medical name of drug, slang name, chemical or trade name, source, classification, how taken, effects sought, long-term symptoms, and whether there is a potential for physical or mental dependence.
3. Make a collage of people who are taking risks. For example, people who are: working in a dangerous situation, athletes, daredevils. Then have the class explain how these risk situations are different from the risks of people who abuse drugs. Questions to help start the discussion might be:
 Who has the greater control?
 Who is taking the greater chance?
4. Discuss stories about discoveries of important drugs.
5. Discussions of reasons why children go to a doctor.
6. Discussion of information on prescription labels.
7. Collect and show labels to the class from prescription and non-prescription medicines.
8. Have pupils make posters on how drugs as medicines contribute to healthful living.
9. List examples of drugs which come from plants, animals, and minerals, and which are synthesized in laboratories.
10. Discuss dangers of taking less than, as well as more than, the prescribed amount of a medicine.
11. Explain main purposes of prescription medicines.
12. Invite a nurse to discuss constructive use of medicines motivated by positive attitudes of self-protection.
13. Invite a pharmacist to talk about the dangers and penalties of misuse of prescription drugs.
14. Identify proper uses of common household products.
15. Show students the warning label on a harmful substance and teach its meaning.
16. Identify the difference between use and misuse of products.

RESOURCES

Films:

Busted, BOCES #832-204, 17 minutes

Drug Problem: What Do You Think?, BOCES (video cassette), 17 minutes

Journey in Time, BOCES #833-85, 26 minutes

Marijuana, BOCES #833-56, 34 minutes

The Perfect Drug Film, BOCES #833-86, 31 minutes

Social Responsibility: It's My Hobby, BOCES #831-298, 10 minutes

Up Pill - Down Pill, BOCES #833-70, 24 minutes

Filmstrip and Cassette:

If Drugs Are the Answer... What Are the Questions, BOCES #392-5, set of six

HEN:

Drug Education Information, BOCES #HN-9, Parts I & II

TOBACCO

Overview

A young person is more likely to become a smoker if his parents, older brothers or sisters, or friends smoke. Pupils who are not very successful academically, are not leaders in school activities, and are not headed for college are also more likely to use tobacco.

These characteristics very frequently apply to the educable mentally retarded student. Therefore, the teacher needs to make a concerted effort to guide pupils to determine specific talents where they can gain success and a sense of accomplishment. Meeting these needs can serve as deterrents to smoking which is sometimes done to compensate for unmet needs.

Finally, one of the most logical reasons for not using tobacco, and one which most students will comprehend, is their exorbitant cost - money which could be used for other things. This should be emphasized, for it can serve as a deterrent until some students develop more sophistication and make mature judgments on their own.

Objectives

1. Identify biased information in cigarette and tobacco advertising.
2. State advantages of good health in leading an active, productive life.
3. Evaluate the factors pertaining to the establishment of the smoking habit.
4. Express an understanding and awareness of the potential health hazards associated with smoking as they pertain to the individual and society.
5. Through the sufficient understanding of the smoking problem, make an intelligent personal decision whether to smoke or not to smoke.
6. Analyze the effects of a "smoking environment" on a non-smoker and a smoker.
7. Name the physiological effects of tobacco on the body.
8. Evaluate those aspects of life which lead to the use of tobacco.
9. Identify the major problems associated with the use of tobacco.
10. Review the organizations determined to alert the public in the area of tobacco.

MAJOR CONCEPTS

1. The young person's decision about smoking is one of several important decisions in his life and should be based on a firm foundation of scientific knowledge.
2. Each individual is unique and therefore each of us arrives at our decision about smoking a different way.
3. Whether the individual starts to smoke or not, the decision is ultimately a personal one.
4. The ability to make an individual, personal decision not to smoke in spite of the opinions and practices of friends and acquaintances is an evidence of maturity.
5. The decision to smoke or not to smoke should be based upon an intelligent interpretation of facts and not upon peer pressure or a personal desire to appear "grown-up."
6. Smoke from tobacco is made up of gases and particles.
7. When a person inhales smoke these gases and particles enter his breathing passages and are deposited on the surfaces. Some are absorbed in the blood and some remain to produce damaging effects on the lining membranes.
8. A young person who is largely dependent on his parents for food, shelter, and other life necessities, should consider the attitudes of his family before starting to smoke.
9. The disadvantages of smoking far outweigh any "advantages" one might imagine.
10. One does not have to smoke to act grown-up.
11. Early users of tobacco were not aware of the consequences of smoking.
12. The incidence of heart disease, lung cancer, and other respiratory diseases has increased rapidly in proportion to the consumption of cigarettes.
13. The reasons why young people begin to smoke are evidence that they do not believe they will experience any of the health hazards.
14. Until recent years, our knowledge of tobacco's effects on the body has been shrouded in myth, superstition, and lack of knowledge.
15. The Surgeon General's Report on Smoking and its conclusions have been accepted by the medical profession and other professional groups.
16. Overwhelming evidence has been compiled which indicates cigarette smoking as a cause of lung cancer.

17. During the growing years, smoking interferes with one's normal growth because of the depressing effect of tobacco on the appetite.
18. For maximal growth, development, and performance, one should avoid the use of tobacco.
19. A wise decision is based upon factual information and mature judgment.
20. Smokers help to pollute the environment for non-smokers.
21. The components of tobacco and its by-products are many.
22. Smoking directly affects many of the body's functions.
23. The risks of cigarette smoking increase with the duration and number of cigarettes smoked per day.
24. The mortality rates of cigarette smokers over non-smokers is particularly high for a number of other diseases including chronic bronchitis, emphysema, cancer of the larynx, peptic ulcers, and heart and coronary disease.
25. The reasons for smoking seem to be related to a range of diverse psychological and sociological behaviors which may be set off by different personal needs.
26. Smoking is an expensive as well as a dangerous habit.
27. Smoking affects the economy in loss through fires, unemployment, disability, death, and other areas.
28. Cigarette advertising is not always accurate and often is misleading.
29. There are a variety of agencies interested in the health of the individual in regard to tobacco.
30. Federal legislation has required cigarette manufacturers to warn the public of the risks of cigarette smoking.
31. Many states have laws and regulations concerning the sale of tobacco products.
32. A mother's smoking has physiological effects on her unborn child.

CONTENT OUTLINE

- I. Recent History of Man's Use of Tobacco (1800 - Present)
 - A. Expansion of the industry
 - B. Increased use of cigars and cigarettes
 - C. Era of Tobacco Reform (1895 - 1921)
 - 1. Many states banned the sale of cigarettes
 - 2. Legal measures had no lasting influence
 - D. The modern tobacco era
 - 1. The United States is a world leader in tobacco
 - a. Production
 - b. Exportation
 - c. Consumption
 - E. Economics of Tobacco
 - 1. Importance as a national product to the economy of the United States
 - 2. Certain of our states base a large portion of their economy on tobacco industry
 - 3. The individual and the economics of tobacco use
- II. Problems Associated with the Use of Tobacco
 - A. Tobacco breath and periodontal disease
 - B. Fire loss
 - C. Employment
 - D. Morbidity and Mortality
 - E. Cleaning costs
 - 1. Homes
 - 2. Clothes
 - F. Advertising
 - G. Smoking in the presence of objecting non-smokers
 - H. Being in places where smoking is not permitted and the desire or need to smoke exists
 - I. Pollution for the Non-smokers
 - 1. Physiological effects of a "smoke-filled" environment
 - 2. Psychological effects of a "smoke-filled" environment
 - J. Psychological Need for Tobacco
 - 1. The "smoker personality"
 - 2. Attitudes toward smoking
 - 3. Development of habit
 - a. Habit forming
 - 1. Taught by others
 - 2. Learned through experiences
 - b. Desirable and undesirable habits
 - 1. Desirable habits
 - a. Effective automatic behavior
 - b. Personal satisfaction
 - 2. Undesirable habits
 - a. Decreased personal effectiveness
 - b. Personal frustrations
 - c. Reasons for development of the smoking habit
 - 1. Curiosity
 - 2. Peer pressure

3. Imitation of adult behavior
4. Other

III. Tobacco and Health

- A. Causes for concern in recent years
 1. Increase in heart disease
 2. More deaths due to lung cancer
 3. Shortened life expectancy of smokers
- B. Increased tobacco use in the United States
 1. Per capita cigarette consumption increased since 1900
 2. Corresponding increase in incidence of lung cancer and other cardio-respiratory illnesses
 3. Consumption of pipe tobacco and cigars has decreased
 4. Smoking by teenagers has increased
- C. Surgeon General's Report
 1. Report made in 1964
 2. Research findings
 - a. Cigarette smoking is a cause of lung cancer
 - b. The incidence of heart disease is higher among smokers than non-smokers
 - c. Other respiratory diseases are more common among smokers
 3. People who have never smoked are least apt. to die from lung cancer
- D. Other effects of tobacco
 1. Effects on the respiratory system
 - a. Interferes with normal breathing
 1. Ciliary Action
 2. Mucous Membrane
 - b. Athletes are instructed not to smoke
 - c. Tendency toward more frequent colds of longer duration
 - d. Chronic bronchitis
 - e. Emphysema
 - f. Lung cancer
 2. Effects on the digestive system
 - a. Smoking tends to reduce one's appetite
 - b. Interferes with the ability to taste and enjoy food
 - c. Ulcers - increased stomach acidity and delayed emptying
 3. Effects on heart and circulatory system
 - a. Smoking increases heart pulse rate
 1. Disadvantages to the athlete
 2. Affects efficiency of body muscles
 - b. Increases blood pressure
 - c. Interferes with coronary circulation
 - d. Buerger's disease
 4. Growth and Development
 - a. Decrease the desire for food
 - b. Deprives body of fresh air necessary for the growth of tissue
 - c. Decreased physical performance

IV. Organizations Concerned with the Tobacco Problem

- A. American Cancer Society
- B. American Lung Association
- C. American Medical Association
- D. American Heart Association
- E. American Dental Association

V. Your Decision About Smoking

A. Important considerations

- 1. Effects of smoking on one's health
 - a. Content of smoke
 - b. Physiological effects
- 2. Effects of smoking on physical performance
- 3. The expense of smoking
- 4. The smoking habit may last your lifetime
- 5. Safety implications of smoking
- 6. Attitudes of parents and other family members
- 7. Uniqueness of the individual

B. Making the right decisions

- 1. A mature decision based on a clear understanding of tobacco and its use
- 2. The extent to which a person is "grown up" is not measured by his decision to smoke

LEARNING AND EVALUATIVE ACTIVITIES

1. Have pupils tell about adults they know that have quit smoking or that have tried to quit. Why did they decide to quit? Were they successful?
2. Use a smoking machine so students can see and smell substances that collect in the lungs.
3. Divide the class into small groups of no more than five members each. Students select a leader for their group. Each group may discuss the topic, "What Makes a Person Truly Grown Up?"
4. Compare the increased rates of lung cancer, heart disease, etc., with the increased per capita consumption of tobacco. The students should be encouraged to note relationships between increased tobacco sales and the corresponding increase in lung cancer.
5. Invite the school physician or school nurse-teacher to speak to your class about the increase in lung cancer, heart disease, and other illnesses associated with smoking.
6. Make a bulletin board display of cigarette advertisements and analyze the type of appeals which they utilize.
7. Using current cigarette prices, calculate the total yearly cost of smoking one pack of cigarettes a day. Then calculate the cost for a lifetime.
8. Discuss the nature of malignant growth, emphasizing the low survival rate from lung cancer.
9. A student committee might prepare a bulletin board on "Smoking and Fitness."
10. Have children select and bring to class a cigarette ad from a magazine or newspaper. After studying the ad have them change the message so it tells the other side of the smoking story. (Makes an interesting bulletin board display).
11. Ask each student to survey at least ten persons who smoke more than a pack of cigarettes a day and ask them if they wish they could stop smoking. Have they ever tried to stop smoking? What advice would they give to a young person who does not yet smoke?
12. See if anyone can propose one good reason for using tobacco. How many reasons can the class list not to use it? Choose another poor habit - for example, obtaining only three hours sleep each night. If they can not find even one good reason for losing sleep, would they be likely to adopt this poor habit?

13. Survey one or more grades in your school to determine the extent of smoking among teen-agers. Make the questionnaire anonymous, requiring only the age of the respondent, age when he started to smoke, amount smoked, and perhaps the reason why.
14. Make bulletin board charts showing the amount of tobacco consumed in the United States in recent years.
15. Make a bulletin board showing the amount of money spent on tobacco in comparison to medical expenditures, food for the family, recreation, etc.
16. Initiate student panel discussion on "Things On Which We Are Dependent." Make a differentiation between helpful and harmful dependence.
17. Develop a questionnaire for a school survey on smoking attitudes and habits. Have the committee report the findings back to the class.
18. Invite a representative of a local medical facility to speak to the class on the topic of "smoking and health."
19. Have a class committee prepare a bulletin board display on the hazards of smoking.
20. After listing a number of diseases commonly believed to be caused or aggravated by smoking, assign a small group of students to find the facts which have been determined by research and consider the evidence in each case.
21. Have students calculate the annual expense of smoking one pack of cigarettes daily. Calculate the amount of interest this money would accumulate in a savings account at the current interest rate. By checking newspaper ads, determine what items could be purchased in lieu of the spending on cigarettes.
22. Have students construct a bulletin board display depicting the various advertising techniques utilized in selling cigarettes.

RESOURCES

Films:

Barney Butt, BOCES #832-277, 13 minutes
Breath of Air, BOCES #832-361, 21 minutes
Decision for Mike, BOCES #832-399, 14 minutes
The Drag, BOCES #831-151, 8 minutes
Is Smoking Worth It?, BOCES #832-364, 16 minutes
Smoke Screen, BOCES #831-379, 5 minutes
Smoking Past and Present, BOCES #832-366, 15 minutes
Time for Decision, BOCES #832-367, 16 minutes
Time To Stop Is Now, BOCES #831-394, 4 minutes
Tobacco Problem: What Do You Think?, BOCES (video cassette), 17 min.
TV Messages on Cigarette Smoking, BOCES #832-371, 12 minutes
Who, Me?, BOCES #832-368, 19 minutes

Filmstrips and Cassettes:

Cigarette Smoking: Take it or Leave It, BOCES #392-18
I'll Choose the High Road, BOCES #392-13
Professor Persuader, BOCES #392-15
To Smoke or Not to Smoke, BOCES #392-17

Posters:

All You Smokers Who Plan to Quit Someday, BOCES #P-135
Beautiful Things Happen When You Don't Smoke Cigarettes, BOCES #P-77
Best Tip Yet -Don't Start, BOCES #P-76
Life is So Beautiful, Stay Alive, Don't Smoke Cigarettes, BOCES #P-73

No Thanks Eve, I'd Rather Have An Apple, BOCES #P-75

Smoking is Very Debonair, BOCES #P-69

Smoking is Very Glamorous, BOCES #P-71

Smoking is Very Sophisticated, BOCES #P-70

There's Lots of Love and Living Ahead, BOCES #P-74

HEN:

Smoking, BOCES #HN-22, Parts I and II

ALCOHOL

Overview

The acute social and domestic alcohol-related problems are reflected in broken homes, family misery, neglected children, automobile accidents and criminal problems, unemployment and poverty. A tragically large number of special education students will know this without its having to be said. Their feelings should be considered in presenting this topic to the class.

Additionally, it may be psychologically damaging to allude to the condition of alcoholism as being brought on knowingly and that every victim of alcoholism has made the choice to drink. Pupils should not be made to think of an alcoholic parent as choosing to be what he is.

Positive steps toward good physical and mental health, taken from early childhood on, help to prevent alcoholism. The teacher's awareness of and steps toward compensating for the educable mentally retarded student's frequent feelings of not belonging or being accepted can do much to discourage the use of alcohol for these purposes.

Imitating someone who looks sophisticated to him can be a reason for healthy or unhealthy views on the use of alcohol. With this point in mind, the old adage, "It's not what you teach; it's what you are," certainly has relevance here. If you can share with students the strength which keeps you from reliance on alcohol and emphasize the positive aspects of the human situation, you will be sharing a great gift indeed.

OBJECTIVES

1. Describe several effects of alcohol on the body.
2. List and explain the ramifications of excessive drinking on one's personal life.
3. Conclude the ramifications of excessive drinking on the family.
4. Show, explain and illustrate the effects various media advertising may have upon the individual and his decision whether to drink or not.
5. Identify some common early symptoms of alcohol abuse.
6. Illustrate how the drinking of alcoholic beverages is generally an accepted cultural practice in the United States.

7. Analyze the emotionalism associated with the use of alcoholic beverages arising out of the controversies about it; when, how, where, and by whom they should be used.
8. Distinguish between acceptable and unacceptable drinking patterns.
9. Accept responsibility for drinking behavior if the decision is made to use alcohol.
10. Evaluate the serious social problems resulting from inappropriate use of alcohol.
11. Acquire an understanding of self as a worthwhile person.
12. Develop self-respect and a feeling of responsibility for others.
13. Investigate and acquire substantial knowledge of the legal ramifications of alcohol use and abuse.

MAJOR CONCEPTS

1. Alcohol has little nutritive value.
2. Alcohol affects the body systems and organs.
3. Alcohol is absorbed readily from the stomach and small intestines.
4. Most of the alcohol that enters the body is eliminated by the kidneys via the urine.
5. The frequent and prolonged abuse of alcohol can cause sickness and nervous disorders.
6. The problem drinker usually has problems with his self-concept.
7. The use of alcohol is a factor in many safety problems.
8. The misuse of alcohol often effects employment and efficiency on the job causing financial hardship to the problem drinker's family.
9. The alcoholic is often rejected by a large segment of society.
10. Alcohol misuse causes difficulties with family relationships, especially in the areas of cooperation and respect, and frequently leads to separation or divorce.
11. Alcohol abuse causes more unemployment and some welfare problems.
12. The misuse of alcohol creates more crime, necessitating more police, more courts and remedial programs.
13. The origin of alcohol dates back many centuries and its use has varied with cultures.
14. The driver who has been drinking is a menace on the highway.
15. The various forms of alcohol are produced in many ways.
16. Alcohol may be used in many ways to benefit as well as adversely affect mankind.
17. Continued excessive use of alcohol brings physical and mental deterioration.
18. Behavior of the average drinker can be correlated with the percentage of alcohol in the blood stream.
19. The sale and use of alcoholic beverages is controlled by law.
20. The basic treatment of alcoholism is concerned with the alcoholic recognizing there is a problem and then trying to eliminate the cause of stress situations.

21. The community is involved in the rehabilitation of alcoholics.
22. Impaired judgment and the relaxing of inhibitions represent significant hazards associated with drinking.
23. The person who decides to abstain from the use of alcohol should not be pressured to drink.
24. Excessive drinking does not indicate adult status, maturity, or achievement.
25. When alcohol is used, it should be an adjunct to other pleasurable activities rather than as the focus of an activity or as a problem solver.
26. Drunkenness indicates a person has overdosed with a drug and is particularly prone to impaired judgment and actions.
27. Dangerous blood-alcohol levels can be avoided by restricting drinking to small amounts of alcohol, in appropriate dilution, taken slowly, and preferably in combination with food.
28. Uncontrolled drinking, or alcoholism, is not a weakness or moral defect, but an illness which can be treated successfully.

CONTENT OUTLINE

- I. Uses of Alcohol in Modern Society
 - A. Variety of purposes for alcohol
 - 1. Celebrations
 - 2. Parties
 - 3. With meals
 - 4. Self-medication
 - 5. Escape
 - B. Prevalence of drinking in the United States
 - 1. Number of people who drink
 - 2. Number of people who do not drink
 - C. Society's ambivalent attitudes about alcohol
 - 1. Minimal legal controls
 - 2. Drinking practices
 - 3. Advertising and other enticements
- II. Alcohol in the Body
 - A. Absorption
 - 1. Stomach
 - 2. Small intestines
 - 3. Bloodstream
 - a. Transport
 - b. Oxidation - break down in the liver
 - c. Elimination - breath, perspiration and urine
 - B. Physiological Effects of Alcohol
 - 1. Brain and nervous system
 - 2. Heart and blood vessels
 - 3. Stomach
 - 4. Liver (diet)
 - 5. Kidneys
 - 6. Other (eyes, skin)
 - 7. Interaction of alcohol with other chemicals (i.e. barbiturates)
- III. Psychological Effects of Alcohol
 - A. Individual
 - 1. Drink - why or why not?
 - 2. Characteristics of person
 - 3. Kinds of drinking
 - 4. Responsible drinking behavior
 - B. The Adolescent and Beverage Alcohol
 - 1. Reasons for drinking
 - a. Curiosity
 - b. Peer pressure
 - c. Adventure
 - d. Imitation of adults
 - e. Unaware of dangers
 - f. Other
 - 2. Reasons for not drinking alcohol
 - a. Personal reasons
 - b. Religious training
 - c. Parental pressures
 - d. Other

IV. Problems Associated with Alcohol

A. Personal

1. Physical health impairment
2. Psychological dependency
3. Sickness, nervous conditions
4. Employment affected
5. Self-concept degraded
6. Safety impaired

B. Family Problems

1. Financial
2. Social
3. Parental
4. Marital

C. Community

1. Drinking and driving
 - a. Blood-alcohol levels
 - b. Penalties for violation of the law
 - c. Accidents
 - d. Insurance risk
2. Crime and alcohol
 - a. Major statistics
 - b. What can be done
 - c. Court calendars and alcohol-related crimes
 - d. Police time devoted to alcohol-related crimes
3. Safety
 - a. Pedestrian
 - b. Industry
 - c. Alcohol and medication
4. Unemployment, welfare
5. Family problems
6. Provision of alcoholism treatment facilities

V. Alcoholism as a Disease

- A. Theories of causation
- B. Incidence
- C. Characteristics of alcoholism
- D. Steps to alcoholism
- E. Diseases related to alcoholism
- F. Rehabilitation and treatment

LEARNING AND EVALUATIVE ACTIVITIES

1. Investigate reports of the National Safety Council relating alcohol as a causal factor in motor vehicle accidents.
2. Discussion: Why would the following be interested in whether an individual would drink or not: family, church, government, liquor industry, welfare agencies, employers?
3. Oral and written reports: The effect of alcohol in sports, driving an automobile, flying, and in occupational skills.
4. List the reasons teenagers and adults give for drinking. Evaluate them.
5. Scrapbook: Have pupils make a scrapbook to include pictures and articles concerning the problems created by the use of alcohol.
6. Debate: People who drink to excess are those who are unable to face their problems and are using alcohol as a means of escape.
7. Discussion: Why do individuals who know how alcohol affects sensory perception still drive after they drink?
8. Bulletin Board: Illustrate and display pictures of accidents and other losses attributed to alcohol.
9. Class discussion: What should be our attitude toward alcoholism?
Consider:
 - Alcoholics are sick
 - Alcoholics can be helped
 - Alcoholics need greater public assistance and support
10. Discuss professionals available who can treat alcoholism.
11. Have local policeman discuss the problems caused by drinking drivers.
12. Collect advertisements concerning alcoholic beverages and analyze them in class.
13. Compare the cost of beverage alcohol and the cost of nutritious foods.
14. Discuss the effect of alcohol on behavior: include and explain why alcohol appears to be a stimulant on the body.
15. Have local police department demonstrate the balloon test procedure, etc. for alcohol consumption.
16. On a prepared picture of a human anatomical form, have students label and color code the organs affected by alcohol.

17. Using advertisements from magazines, newspapers, etc., have students prepare a collage for bulletin board display on alcohol.
18. Student report, oral or written, on differences between social drinking, drunkenness, and alcoholism.
19. Oral report on reasons for student drinking. (Perhaps a poll taken by class members.)
20. Have a student prepare a wall chart identifying the warning signs of chronic alcoholism.
21. Student research and report on the various diseases resultant from alcohol abuse.
22. Student oral report on problems suffered by a family if one member drinks immoderately.
23. Student investigation and report on the local, state, and federal agencies which offer aid to alcoholics.
24. Invite a member of an agency offering aid to alcoholics to speak to classes on the functions of the organization in helping alcoholics.

RESOURCES

Films:

Alcoholic Within Us, BOCES #833-109, 23 minutes

The Alcoholism Film, BOCES #833-372, 23 minutes

Filmstrip and Cassette:

Alcohol and You, BOCES #833-55, 28 minutes

Curious Habits of Man, BOCES #832-58, 13 minutes

HEN:

Alcohol Education Materials, BOCES #HN-1, Parts I and II

MENTAL HEALTH

OVERVIEW

Deeply-felt happiness is a constituent of mental health. Men and women who have a sense of well-being, a zest for working and playing, an ability to derive the utmost satisfaction from personnel relationships may be said to be mentally healthy.

Mental health is far more than the absence of mental illness; it has to do with everyone's everyday life. It is the way that each person harmonizes his desires, ambitions, abilities, ideals, feelings and his conscience in order to meet the demands of life as he has to face them.

There are many different degrees of mental health or personal happiness. Perfect happiness comes to no one nor is anyone ever in perfect mental health all of the time. Mental health should be seen by teachers and students as a goal to be worked toward, rather than a gift from the fates.

Some of the children in special classes come from backgrounds characterized by poverty and physical and mental illness. For them it is particularly important to emphasize that individuals can improve their lives by defining the things they want for themselves and working toward them.

Defining what they want should not be seen as a chance to list the material things they would like to buy, but as an opportunity to enumerate the practices and values which they feel will lead toward mental health. Among these might be: having a job and doing it well; being loyal to friends; treating one's spouse with love and respect; accepting one's limitations; and taking good care of one's children.

Another aspect of mental health that definitely needs to be introduced in the classroom is the ability to come to terms with the emotions and reactions involved in the death and dying process and the loss of a significant other. Eventually everyone experiences the death of a close family member, friend or pet, or the disruption of his daily life due to the loss of a parent or mate through separation/divorce. It is for these reasons that death education is included in this unit on mental health.

OBJECTIVES

Suggested Pupil Outcomes:

1. Recognize mental health as one aspect of total health.
2. Become a mature personality able to face life's problems.
3. Analyze the influence of various kinds of persuasion on behavior.
4. Express understanding of oneself, one's value system and how it is related to total world subsistence.
5. Compare the relationship between one's self-concept and how others see one.
6. Achieve self-realization and happiness.
7. Develop one's fullest capacity to love and respect.
8. Demonstrate understanding and emotional control by adequately meeting situations that occur in one's environment.
9. List the various influences that affect personality and explain their various facets.
10. Conclude that the differences among individuals affect the substance and quality of life.
11. Analyze the psychological and physiological changes which are taking place in one's body and how each individual's maturation rate varies and has an effect on one's personality.
12. Develop an awareness that death is the final realization in the life of each individual.

MAJOR CONCEPTS

1. Each individual is a unique biological pattern caused by heredity and environment.
2. Personality is the totality of the individual.
3. A healthy personality relates well to others and is able to adjust to the emotional, social, and physical stresses of life.
4. Friendships contribute to a person's well-being.
5. Consideration and respect for others is important.
6. A person with good mental health respects the many differences they find in other people.
7. We develop and change habits because of experience.
8. Maturity is the ability to deal with situations of your life in a realistic and effective way.
9. Maturity consists of physical and personality changes.
10. Personality traits such as disposition and honesty, are not inherited but are largely the result of family and other environmental influences.
11. All people should have some insight into their own capabilities, strengths and weaknesses, and how to use these for further growth.
12. Individuals have psychological needs that are considered basic to their well-being.
13. Feelings that affect people's behavior are called emotions.
14. Any given emotion may be expressed in either a positive or negative manner.

CONTENT OUTLINE

- I. Personality
 - A. Concept of personality
 - 1. Definitions
 - 2. Healthy personality
 - B. Development of personality
 - 1. Influences of environment and experience
 - 2. Influences of heredity
 - a. Body structure
 - b. Physical features
 - c. Intelligence
 - d. Sensory efficiency
 - e. Rate of physical growth
 - f. Sex
 - C. What characteristics are not inherited?
 - 1. Traits
 - 2. Specific skills
 - D. Basic human needs
 - 1. Physiological needs
 - a. Nutrition
 - b. Shelter
 - 2. Psycho-social needs
 - a. Psychological security
 - b. Love
 - c. Approval
 - d. Independence
 - e. Feel significant
- II. The Totality of the Individual
 - A. Physical factors
 - B. Behavior
 - 1. Drives
 - 2. Urges
 - C. Individual traits
 - 1. Desirable
 - 2. Undesirable
 - D. Continuous growth of personality throughout life
- III. Behavioral Responses to Living and Working
 - A. Success
 - B. Frustration
- IV. Fundamental Emotions
 - A. Love
 - 1. Self love
 - 2. Love of parents and family
 - 3. Love for a friend
 - 4. Heterosexual love
 - 5. Homosexual love
 - 6. Love for animals
 - B. Fear
 - 1. Superstition
 - 2. Anxiety
 - 3. Phobia
 - C. Anger

- V. Reactions to Stress
 - A. Anxiety and its physiological and psychological effects
 - B. Mental mechanisms
- VI. Death as a Finality
 - A. Causes of death: anytime, any age
 - 1. Disease
 - 2. Suicide
 - 3. Accident
 - B. Emotions dealing with death
 - C. Determination of death
- VII. Assistance in Resolving Minor Physical and Mental Problems
 - A. Family medical physician
 - B. Mental health clinic
 - C. Religious consultant
 - D. Guidance personnel
- VIII. Treatment of Mental Disorders
 - A. Psychotherapy
 - B. Group therapy
 - C. Recreational therapy
 - D. Mental health personnel
 - 1. Psychiatrist
 - 2. Psychologist
 - 3. Psychiatric social worker
 - E. Facilities
 - 1. Psychiatric hospitals
 - 2. Community mental health centers
 - 3. Private doctors' offices

LEARNING AND EVALUATIVE ACTIVITIES

1. Have a panel discussion on the reasons for rules and laws.
2. Discuss honesty, dishonesty, and their effects on self and others.
3. Discuss how your own behavior makes you feel - good behavior, poor behavior.
4. List the qualities you like in other people. Which of these do you feel are most important? Why?
5. Ask each child to write a short paper titled, "Why X Is My Best Friend". List on the board the qualities of friendship. Discuss the importance of friendship and how to be a good friend.
6. Discuss attitudes that are important in friendships.
7. Demonstrate that persons tend to react in a positive manner to attitudes of friendliness and courtesy, and in a negative manner to expressions of hostility.
8. Make a list of "What Your Family Expects of You" and compare it with a list of "What Your Friends Expect of You", i.e. telephone use, hair style, dress code, curfew hours, etc.
9. Discuss this question, "Is it necessary for me to do everything that my friends do and am I strong enough to refuse?"
10. Discuss what emotions are, how they are shared by all persons, but sometimes expressed differently.
11. Discuss ways in which the emotions develop.
12. Dramatize or discuss negative emotional behavior. Discuss constructive outlets for "pent up" anger, etc.
13. List on the board some positive ways to manage emotions such as anger, etc.
14. Have pupils reflect upon ways in which fear can be constructive.
15. Have students make a collage showing life versus death.
16. Class discussion allowing students to express their feelings on a death experience they have encountered.

17. As we all know it is important for teenagers and their parents to communicate. This is a simple and interesting way to illustrate to the young people in your classroom the communication gap and some possible solutions. On a piece of paper, have the students write fifteen things which are important to them. When this is completed, draw three columns next to the list. In the first column have the students check the items which they do not discuss with anyone. In the second, check those which are discussed with friends only. In the third, check off the things which are discussed with their parents. When the list is completed, use this as a jumping off point for classroom discussion.

RESOURCES

Films:

The Black Rabbits and the White Rabbits, BOCES (video cassette),
8 minutes

End of One, BOCES #831-220, 7 minutes

Growing Pains, BOCES #832-297, 13 minutes

How to Say "NO" to a Rapist...And Survive, BOCES #833-150 and 151,
26 minutes each

Love to Kill, BOCES #832-215, 16 minutes

Papa, You're Crazy, BOCES #832-268, 18 minutes

The Parting, BOCES #832-326, 16 minutes

Spaces Between People, BOCES #832-221, 16 minutes

Social Side of Health, BOCES #831-193, 10 minutes

Soon There Will Be No More Me, BOCES #831-333, 10 minutes

Then One Year, BOCES #832-337, 19 minutes

Understanding Stresses and Strains, BOCES #831-190, 10 minutes

Upturned Face, BOCES #831-336, 10 minutes

Violence Just For Fun, BOCES #832-223, 16 minutes

Walls and Windows, BOCES #832-341, 13 minutes

You See, I've Had a Life, BOCES #842-52, 32 minutes

Kits:

Effective Communication, BOCES #123-4

Interpersonal Communications, BOCES #123-15

Posters Without Words, BOCES #123-16

Search for Meaning, BOCES #123-12, value clarification activities

Games:

Body Talk, BOCES #110-25

Can of Squirms, (High School), BOCES #110-16

Feelin', BOCES #110-24

The Ungame: Tell It Like It Is, BOCES #110-29

Why Am I Afraid To Tell You Who I Am?, BOCES #110-12

You!, BOCES #110-23

HEN:

Mental Health Materials, BOCES #HN-18

TEACHER REFERENCES

The Controllers, Jim Cole; Shields Publishing Company, 1971. 150
C

Deciding, H.B. Gelatt, et al; College Entrance Examination Board,
1972. 371.4
G

Decisions and Outcomes, H.B. Gelatt, et al; College Entrance
Examination Board, 1973. 371.3
G

"Emotional Problems in Mental Retardation - Utilization of
Psychiatric Services", J.Q. Simmons, Pediatric Clinic of
North America, 15:957, 1968

The Facade, Jim Cole; Shields Publishing Company, 1970. 150
C

The Helpers, Jim Cole; Shields Publishing Company, 1973. 150
C

Helping Your Child to Understand Death, Anna Wolf, 1973

Juxtaposition, James Burl Hogins and Gerald A. Bryant, Jr.;
Science Research Associates, Inc., 1971. 149
H

Mental Retardation: Its Social Content and Social Consequences,
B. Farber; Boston, Houghton, 1968

"The Mentally Retarded Adolescent: A Review of the Characteristics
and Problems of 44 Noninstitutionalized Adolescent Retardates",
S.L. Hammar and K.E. Barnard, Pediatrics, 38:845, 1966

"Psychopathology and Mental Retardation", I. Philips, American Journal
of Psychiatry, 124:29, 1967

Values Clarification, Sidney B. Simon et al; Hart Publishing Company,
Inc., 1972. 371.3
S

Why Do We Jump to Conclusions?, Sanford I. Berman; International
Society for General Semantics, 1962. 149
B

FAMILY LIFE

OVERVIEW

As the retarded individual approaches adulthood, he has the normal problems experienced by all young people -- compromising his own desires with the dictates of society, establishing a firm foundation of mental health, and developing a sense of identity which will provide him some constancy in a world characterized by change. Like all young adults, he has to find a satisfying job in a society which places great value on the work ethic but has a limited number of jobs; to establish a meaningful relationship with a person of the opposite sex; and, indeed, just to meet the day to day responsibilities of adulthood like paying bills and driving safely.

A good understanding of the responsibilities involved in marriage and child-raising is essential. Defining and describing these responsibilities is a good way to make students conscious of them, and of the sacrifices as well as satisfactions which they imply.

OBJECTIVES

Suggested Pupil Outcomes:

1. Identify characteristics of one's family environment.
2. Analyze heredity as a factor in role arrangement of family members.
3. Analyze environment as a factor in role arrangement of family members.
4. Acquire a knowledge for understanding and the attitudes for accepting roles and responsibilities as a family member.
5. Identify economic factors which cause most parents to seek employment.
6. Explain the use and importance of money in the family unit.
7. List the functions of the family.
8. Develop and express an understanding and appreciation of the significance of a happy and effective family life in present day America.
9. Accept that the roles of the family change as society changes.

10. Demonstrate attitudes which promote harmony.
11. Explain why choices must be made in satisfying wants and needs.
12. Identify cause-effect relationships which are contributing factors in the disruption of harmonious family life.
13. Conclude that each individual family member is unique due to the interaction of heredity and environment.
14. Understand the interrelationships of heredity and environment and utilize this knowledge in forming attitudes and behavior.
15. Express the significant role the family cycle plays in the development of attitudes, standards, and values.
16. View one's sexuality with maturity commensurate with one's age.
17. Assume one's sex role and develop high ideals for one's adulthood and future family.
18. Understand that biological sexuality is only one phase of total maturity.
19. Build a wholesome attitude toward sex.
20. Discuss with dignity and without embarrassment the problems of growing up sexually.
21. Express an awareness of the relationship between sexuality and physical and emotional behavior.
22. Analyze responsibilities and privileges involved in dating, a marriage relationship and family planning.
23. Evaluate the various contraceptive methods and devices.
24. Investigate individual assets and traits that contribute to successful marriage.
25. Explain the basic processes of conception, pre-natal development and birth.
26. Maintain positive standards of behavior based on the progressive acceptance of moral responsibility for his/her own sexual behavior as it affects others as well as himself/herself.

MAJOR CONCEPTS

1. Nuclear groups are the basic family pattern in the United States.
2. Family patterns differ throughout the United States, and throughout the world.
3. In our society the structure of the family is changing.
4. The family has certain recognized and accepted functions and purposes as a social institution in society. (Procreation, education, transmission of culture, etc.)
5. Parents and family play a vital role in child development and influence attitudes, behavior and personality of the individuals they produce.
6. The family satisfies the personal needs, aspirations, desires, and drives of the individuals who make up the family.
7. Since the family is a small society, responsible communication can lead to wise decisions, but it is important that all family members have the opportunity for responsible self-expression in family affairs.
8. The moral and spiritual values prevailing in the family group will help to shape family relationships.
9. The relationships within a family are in a process of constant evolution.
10. Individual actions and well-being can contribute or detract from the well-being of the family.
11. The independent nature of family life requires that each member develop a sense of responsibility.
12. Membership in a family can give one pride.
13. Changes that occur in daily living affect family life.
14. Family problems can be solved when all family members work as a unit.
15. We feel more secure within the family when we make decisions and accept the consequences.
16. Parental decisions are usually made with the welfare of the total family in mind.
17. Early childhood education is a family responsibility.

18. Leisure time activities affect the development of wholesome family morale.
19. Children are adopted so they may share the love and experiences of family life.
20. In some families, a new father or a new mother may be chosen to fill the necessary parent role.
21. Sex is inherited and forms the basis for our sexuality throughout life.
22. Behavior as males or females is partly determined by heredity, but is largely learned within the family setting.
23. The responsibility and privileges in dating during the transition from adolescence to adulthood allow boys and girls to develop understanding of each other.
24. Young adults are faced with varying degrees of premarital adjustment problems.
25. Personal decisions concerning sexual conduct are intimate, individual decisions, unique in time, place and the personalities involved.
26. Psychological, physiological and social factors influence an individual's attitudes toward sex.
27. Mature judgment concerning dating can lead to a good choice in marriage partners.
28. Cultural and family values, standards and attitudes influence selection of marriage partners.
29. Our society has special ceremonies and laws to make the change from courtship to married life.
30. Marriage calls for continuous individual adjustment.
31. Beginning families need to establish ground rules for routine married life.
32. Medical research in the area of birth control makes family planning a modern reality.
33. Pregnancy and childbirth are natural events of human life.
34. The human fetus develops in a unique manner.

CONTENT OUTLINE

- I. Family as a Social Unit
 - A. Family groups
 - 1. Nuclear families
 - 2. Extended families
 - 3. Adoptions
 - B. Family dynamics
 - 1. Government in the family
 - 2. Communication in the nuclear family
 - 3. Variations in family patterns
 - 4. Family activities
 - 5. Health of family members
 - 6. Effects of loss of significant other through illness, death, separation or divorce
 - C. The role of the family in the community
 - 1. Social
 - 2. Economic
 - 3. Cultural
 - D. World influence on individual families
 - 1. Family patterns in different countries
 - 2. Cultural heritage
- II. Role Arrangements in Family Life
 - A. Maleness and femaleness
 - 1. Heredity
 - 2. Environment
 - 3. Learning sex roles
 - B. Effects of role reversals
- III. Functions of the Family
 - A. Reproduction
 - B. Economic cooperation
 - C. Emotional nurturance
 - D. Socialization
 - E. Education
 - F. Transmission of culture
- IV. Responsibilities of the Family Members to
 - A. The individual
 - B. Each other
 - C. Children born of the union
 - D. Significant others
 - 1. A new baby
 - 2. Adopted child
 - 3. A new parent image
 - 4. Grandparent living with family

- V. Human Reproduction
 - A. Male reproductive system
 - 1. Structure and functions
 - 2. Male hormones
 - B. Female reproductive system
 - 1. Structure and functions
 - 2. Female hormones
- VI. Fetal/Pre-natal Development
 - A. Fertilization
 - B. Stages of development
 - C. Psychological considerations
 - D. Birth of a baby
- VII. Family Planning
 - A. Review of basic anatomy and physiology of male and female reproductive systems and terminology
 - B. Conception
 - C. Contraception
- VIII. Responsibilities and Privileges in Dating
 - A. Influential factors in dating behavior
 - 1. Family influence
 - 2. Peer pressure
 - 3. Mass media
 - B. Disadvantages of early dating
 - 1. Limits emotional growth
 - 2. Curtails relationships with others
 - C. Dating considerations
 - 1. Asking for a date
 - 2. Accepting or rejecting a date
 - 3. Going steady
 - a. Advantages
 - b. Disadvantages
 - D. Dating behavior
 - 1. Kissing
 - 2. Making out
 - 3. Sexual intercourse
 - a. Emotional implications
 - b. Social implications
- IX. What to Look for in a Marriage Partner
 - A. Maturity: physical and emotional
 - B. Good personality
 - C. Economic responsibility
 - D. Familial responsibility

X. Current Issues Related to Sexuality

- A. Abortion
- B. Homosexuality
- C. Transsexualism
- D. Transvestism
- E. Separation and divorce
- F. Adoption
- G. Criminal sex offenses
 - 1. Child molesting
 - 2. Rape
 - 3. Prostitution
- H. Communal living
- I. Common-law marriages
- J. Double Standard
- K. Sexual values in society and the individual's responsibility
- L. Venereal disease
- M. Premarital pregnancy
- N. Birth defects
- O. Frigidity
- P. Impotence
- Q. Sodomy
- R. Sexual molestation or exploration..
- S. Incest
- T. Parental seduction
- U. Promiscuity

LEARNING AND EVALUATIVE ACTIVITIES

1. Discuss differences between nuclear and extended families, including families where adoption or remarriage is concerned. Note differences and similarities.
2. Discuss authority in a family in terms of responsibility. (i.e. Who has the authority? How is authority used? Why is authority delegated? How is authority divided? How is authority not delegated?)
3. Encourage children to participate in home activities to acquire a sense of belonging.
4. Provide an opportunity for the pupils to discuss highlights in family life: Honors won by members of a family, anniversaries or birthdays celebrated at home.
5. Develop ideas as to how family can adjust to changes in the family pattern - new baby or adoption of new member, illness, working mother, death of family member or pet, moving, separation or divorce, remarriage, loss of job, etc.
6. Ask the students to give illustrations of how their parents showed love and affection to them from early childhood to the present. Ask the students how they returned this love and affection.
7. Discuss the physical changes from boy to man and girl to woman.
8. Discuss the need of proper body care and good grooming: sleep, exercise, proper diet, personal hygiene, etc.
9. Discuss awkwardness and lack of coordination as a characteristic of this age group.
10. Discuss the condition of acne and the importance of good skin care.
11. Discuss the advantages of giving birth to a baby in the hospital instead of at home.
12. Compare the learning one gets from a close friendship with a member of the same sex and from a dating partner.
13. Teacher: Use the board and with the students assistance, list as many sentences as possible that demonstrate different uses and meanings of the word "love".
14. Construct a check-list of traits that you would look for in selecting a spouse. Be prepared to explain why.
15. Make a check-list of the various roles which a husband and wife play in their normal lives.

16. Have students write a list of the male and female sexual anatomy as the students know them. (Not to be signed or graded.) From this, construct a list of the proper terminology.
17. Discussion of pre-natal development and the process of childbirth.

RESOURCES

Books:

From Conception to Birth: The Drama of Life's Beginnings, Robert Rugh; Harper and Row

Love and the Facts of Life, Evelyn Duvall, 1963

On Being the Parent of a Handicapped Youth, Sol Gordon; New York Association for Brain Injured Children. Available through SEIMC

Reproduction, Sex, and Preparation for Marriage, Lawrence Crowley, 1973. 612.6
C

Survival in Marriage, Gail Putney Fullerton; Holt, Rinehart and Winston, Inc., 1972. 612.6
F

The "Brain Injured" Adolescent, Sol Gordon; New York Association for Brain Injured Children, 1973. Available through SEIMC

Why Marriage?, Edward E. Ford; Argus Communications, 1974. 612.6
F

Films:

About Conception and Contraception, BOCES #831-374, 11 minutes

Adolescent Sexual Conflict: Are We Still Going to the Movies?, BOCES #832-373, 14 minutes

Close Feelings, BOCES #832-17, 11 minutes

First Days of Life, BOCES #832-400, 16 minutes

The Game, BOCES #843-9, 28 minutes

Growing Pains, BOCES #832-297, 13 minutes

Homosexuality: What About McBride, BOCES #832-300, 14 minutes

Have a Healthy Baby, BOCES #832-90, 16 minutes

How To Say "NO" To A Rapist...And Survive, Part I - BOCES #833-150, 26 minutes, Part II - BOCES #833-151, 26 minutes

It Couldn't Happen To Me, BOCES #833-154, 28 minutes

Films: (Con't.)

Human Reproduction, BOCES #832-53, 20 minutes

Like Other People, for rental write: Planned Parenthood of
Santa Barbara County, Inc., 322 Palm Avenue, Santa Barbara,
California 93101

Methods of Family Planning, BOCES #832-180, 18 minutes

Phoebe, BOCES #843-15, 29 minutes

Pamphlets:

ABC's of Birth Control, BOCES #P-96

The Modern Baby, BOCES #P-86

Several pamphlets which may be of resource value to teachers
are available from: Ed-U-Press
760 Ostrum Avenue
Syracuse, New York 13210

HEN:

Family Life Education, BOCES #HN-12

Charts:

Human Reproduction, BOCES #CH-3

Methods of Birth Control, Planned Parenthood of Northern New York,
Inc., (Flip chart - diagrams and caption)

Model:

Human Development, BOCES #MO-1

CONSUMER, COMMUNITY, ENVIRONMENTAL AND PUBLIC HEALTH

OVERVIEW

As the older mentally handicapped student prepares for independent living, he assumes responsibility for contributing to the health of his community and environment as well as himself and his family. This is not always obvious, even to non-handicapped adults. But it needs to be stressed with all young people, especially those who may have trouble seeing the interrelationships between consumer, environmental and public health.

The young person who is going to be driving a car must realize that he is releasing pollutants into the atmosphere which cause or aggravate respiratory diseases. If he lives in a city, the use of public transit may be suggested as an alternative. If he lives in the country, he might enjoy riding a bicycle or walking wherever possible.

For the young adult who plans to marry, the problem of world population is one which should be understood; and it should be emphasized that no matter whether a person lives in New York or Bangladesh, he must decide whether he will make the situation worse or better by his actions.

The person who buys food for his or her family can contribute by the choices he or she makes to health. This does not refer to just the obvious effects which wide food choices have on physical health, but the effects of discarding paper, aluminum foil, jars and cans into the environment. Not only is fresh food better in season but it usually has a minimum of wrapping, unlike canned products.

The adult who buys other products and appliances for the home, if a good consumer, can contribute to environmental health. Informing one's self about the relative values in cars, for example, may prevent contributing as often to the automobile cemetery which graces the outskirts of many American cities and towns. A washing machine may look fine in the home laundry, but a broken one does not contribute to the appearance of the front porch, where it often seems to find itself when the family has reached the point of despair!

It is also most important that these young individuals be prepared as wise consumers in the area of obtaining proper medical care and distinguishing between myth, misconception, half-truth and truth. Without such capabilities these students can easily become prey for quacks and misleading advertisers.

OBJECTIVES

Suggested Pupil Outcomes:

1. Define the basic concepts relating to the environment.
2. Identify the elements within the natural environment that have the potential for being harmful.
3. Identify the potentially hazardous elements in our environment that are consequences of human influence.
4. Describe how man can protect against the various harmful effects of the environment.
5. Cite examples of actions that demonstrate the responsibility of the individual for preserving and enhancing the quality of his environment.
6. Analyze the role of the people in the family, school, community and nation that cooperate to protect the environment.
7. Explain how man has the ability to destroy or preserve the earth's beauty and benefits through thoughtless exploitation or effective planning and constructive action.
8. Describe how the contamination of the environment through abuse is a genuine threat to man's health and future existence.
9. Be aware that the health status of an area is related to the geographic location and the level of development of the area.
10. Describe the factors that determine when one should make use of health services.
11. Identify the factors that influence self-medication.
12. Distinguish between prescription drugs and over-the-counter drugs.
13. Identify the characteristics of non-prescription drugs.
14. Distinguish between medical and non-medical health practitioners.
15. Evaluate the practice of using another person's medication.
16. Develop criteria for making the most of one's health dollar.
17. Describe the nature of advertising and promotion practices.
18. List some purposes of advertising.
19. Analyze the aspect of truth in advertising.

20. Describe ways in which false advertising is dangerous to the health consumer.
21. Identify misleading statements and claims in health advertising.
22. Evaluate the use of testimonials and guarantees in health advertising.
23. Evaluate deceptive packaging techniques and higher costs.
24. Identify techniques used by advertisers that take advantage of the psychological reactions of consumer groups.
25. Relate emotions, family patterns, and values which influence the selection and use of health information, products and services.
26. Express and understanding of the roles, responsibilities and trainings required in health careers.
27. Cite not only the financial but the humanitarian rewards of health occupations.
28. Express an awareness of future opportunities in health careers.
29. Determine that there are health careers for all types of skills, i.e. professional, technical, physical.
30. Appreciate the scientific progress in the field of health education which has presented new horizons and undreamed of frontiers to reshape our lives.
31. Apply the information that harm can result from self-diagnosis, self-medication, and the unwise use of drugs, medicines, devices, cosmetics, and dietary supplements.
32. Discuss the uses and misuses of water, land, and air.
33. Understand the interrelationship between man's health and his biological environment.
34. Know how to select and evaluate competent medical, dental, and other health personnel and services.
35. Appreciate and understand the functions of consumer organizations and health agencies and their responsibilities in supporting and promoting health programs.
36. Encourage in discussion about population increase and its effect on the environment and the humans within it.
37. List the main sources of pollution in the environment.
38. Relate the community responsibilities for water purification, air purification, and sewage treatment.

39. Identify and analyze international health problems.
40. Evaluate old myths and cures.
41. Identify the dangers in cancer, arthritis and other quackery devices and procedures.
42. Conclude the importance of food standards and other governmental regulations for protecting consumers under federal laws.
43. Examine various types of health insurance programs - state, federal and private.
44. Identify the major international health organizations that contribute to health on a world-wide basis.

MAJOR CONCEPTS

1. The existence of man depends upon his interrelationships within the environment.
2. Our immediate surroundings, including the people in the surroundings, have an effect on us.
3. Human life depends on water and air.
4. Sanitary conditions are improved through the efforts of many interested groups.
5. Improper and inadequate disposal of sewage or waste disposal can contribute to the transmission of disease.
6. We are dependent upon many people for safe water and air.
7. Radiation in the air has come to be considered a pollutant.
8. Several organizations and agencies help to prevent and control disease on a world-wide basis.
9. Disaster prevention is the concern of expert organizations.
10. People must be protected against diseases borne by food.
11. Many health agencies and organizations serve, protect and inform the consumer.
12. Laws and regulations protect our health and health of others.
13. Evaluation of standards, health products and health services requires critical thinking.
14. Professionally trained health specialists safeguard our health.
15. There are many different kinds of medical and health related specialists.
16. Emotions, family patterns and values influence selection and use of health information, products and services.
17. Consumer health involves wise judgment and selection of health information, products and services that pertain to health.
18. The quality of a product may mean spending more - a bargain is not always a saving of money.
19. Some health products are inferior or unneeded.
20. Accurate information on labels, in advertising and promotions, are consumer rights.

21. Unlimited opportunities are available in many fields under the broad spectrum of health careers for those students who are interested in richly rewarding occupations.
22. Health career opportunities can lead to great satisfactions that one receives from helping others.
23. The environment has a significant effect on individual and community health.
24. Public Health services help to maintain a healthy community.
25. It is the individual's responsibility to learn to measure the reliability of the great variety of health products and services available.
26. Self-diagnosis and treatment can endanger health.
27. The Food and Drug Administration and the Federal Trade Commission are responsible for the safety, effectiveness, and advertising of prescription and over-the-counter drugs.
28. A person must be able to select qualified and competent medical, dental, and allied health personnel and services.
29. Many of the present environmental health problems began hundreds of years in the past.
30. The food supply for metropolitan areas presents an increasing number and variety of public health problems.
31. The effects of pollutants on health, whatever their nature, are both direct and indirect.
32. There is a need for the establishment of air quality standards in terms of known and suspected effects on what is necessary for the protection of human health and welfare, agriculture and property.
33. Conservation and control of water and air affect our world community.
34. Personal health and community health are interwoven with world health.
35. Protection and promotion of health is an individual, community, and international responsibility.
36. Any disease with an unknown etiology and no known sure cure is prey to unscrupulous tactics by quacks.

37. Exaggerated reports of medical information or false advertising may result in emotionally based desires for products or services.
38. Health problems are best dealt with by appropriate specialists.
39. A significant portion of one's lifetime income is spent for health and medical care.
40. Wisely purchased health insurance contributes to individual and family security.
41. There are a variety of forms of Health Services available to families in most areas of the country.
42. Standards for the processing and labeling of foods, drugs and cosmetics are defined by the Food and Drug Administration.
43. Health agencies and legislation help protect the consumer from fraudulent and harmful products and services.
44. Organizations, agencies and laws are society's methods of protecting the health of the individual and the community.

CONSUMER, COMMUNITY, ENVIRONMENTAL AND PUBLIC HEALTH

OVERVIEW

- I. Environmental Health in Review
 - A. History of early attempts at controlling environmental problems
 - B. The efforts of the Pioneers
 - C. Early public health measures
 - D. Many scientists have contributed to disease control (i.e. Lister, Jenner, Salk)
- II. Relationship Between Environment and Disease
 - A. Sharing our environment
 - B. Disease-causing organisms
 - C. Controlling the environment
 - D. Improving man's health status
 - E. Population increased ecology
 - F. Industrialization
 - G. Urbanization
- III. Water and Waste Disposal
 - A. The ways we use water
 - B. The sources of water
 - C. A look at water pollution
 - 1. Sources of pollutants
 - 2. Effects of pollutants on various living things
 - 3. Preventing pollutants from entering our water supplies
 - D. Sewage treatment
 - 1. City
 - 2. Rural
 - 3. Industrial
 - E. Individual responsibilities
 - F. Cooperative community efforts
- IV. Air and Air Pollution
 - A. Need for clean air
 - B. A look at air pollution
 - 1. Definition of air pollution
 - 2. Causes of pollutants entering our air
 - 3. Effects of air pollution
 - 4. Controlling the entrance of pollutants into our air
 - C. Radiation and radiological pollution
 - 1. The story of decay of radioactive substances
 - 2. Effects of radiation on living things
 - 3. Controlling radiological pollution
- V. Food
 - A. Old methods of handling food
 - B. Modern food handling techniques
 - C. Food laws
 - D. Milk sanitation
 - E. Pasteurization
 - F. Food contamination
 - G. Transmission of disease by food
 - H. Protecting our food supplies

- VI. Insects and Rodents
 - A. History of disease caused by insect vectors and rodents
 - B. Scope of the present-day problems
 - C. Modern control methods
 - D. Community agencies responsible for control procedures
 - E. Individual responsibility
- VII. Garbage and Refuse Disposal
 - A. Problems of accumulation
 - B. Proper storage of substances to be disposed until collected
 - C. Collection
 - D. Modern disposal methods
 - E. The individual's responsibility
 - F. The community's responsibility
- VIII. The Individual as a Health Consumer
 - A. What is a health consumer?
 - B. Who are health consumers?
 - C. How are health consumers important?
 - 1. Influence on the kinds of health services and products made available
 - 2. Prices of items are affected by consumer actions
 - 3. Influence on the quality of health services and products
 - D. What special problems do health consumers face?
 - 1. Deciding when to seek health services
 - 2. What health problems can be treated without visiting a doctor
 - a. Self-medication
 - b. The hazards of treating oneself for illnesses
 - 3. The Scientific Revolution
 - E. How to be an intelligent health consumer
 - 1. Purchasing and using drugs and medicines
 - a. Prescription medicines
 - b. Non-prescription medicines
 - 1. Labeling
 - 2. Limitations of use
 - 3. Other pertinent information
 - 2. Choosing medical and dental care
 - a. Types of medical doctors
 - b. Health-related specialists
 - c. Dentists
 - d. Other nonmedical health personnel
 - e. A look at how the health consumer can select his health advisor
 - 1. Sources of information
 - 2. Criteria for selection
- IX. Ethics in Health Advertising and Promotion
 - A. Definitions of important terminology
 - 1. Advertising
 - 2. Promotion

- B. The purposes of advertising
 - 1. Increasing consumer demand
 - 2. Educating the consumer
 - 3. Developing large-scale distribution
 - C. The responsibilities of advertisers to consumers
 - 1. Advertising and truthful claims
 - 2. Advertising messages in good taste
 - 3. Advertisements and respect for the privacy of the individual
 - 4. Advertising on labels and its accuracy
 - D. The responsibilities of advertisers to the industry
 - 1. Respect for copyrights
 - 2. Trademarks - their meaning and use
 - 3. Advertisers and avoidance of the use of libelous statements
 - E. The advertising industry and control of the activities of its members
- X. Undesirable Promotional and Advertising Techniques
- A. General criticisms of health advertising
 - 1. Claims are distorted beyond that which is approved in the products final printed labeling
 - 2. Deceptive research claims
 - 3. Encourage unnecessary purchases
 - 4. Stimulate emotional rather than rational buying
 - 5. Advertising increases the cost of health products
 - 6. Advertising language is often confusing and meaningless
 - 7. Health product ads often contain more half-truths than truths
 - 8. Other criticisms
 - B. Deceptive health advertising
 - 1. False advertising
 - a. Claims must be proven by manufacturers
 - b. Controlled by special agencies
 - c. Dangerous to health consumer
 - 2. Misleading statements and claims
 - a. Pseudo-medical endorsement
 - b. Omission of facts
 - c. Peculiar use of words
 - 3. Testimonials
 - 4. Guarantees
 - 5. Incomplete labeling
 - 6. Deceptive packaging
 - 7. Exploitation of special groups
 - a. Children
 - b. Teenagers
 - c. Older population
 - 8. Other deceptive techniques
 - a. Fictitious bargain
 - b. The "favored few"
 - c. Bait advertising
 - C. How the consumer can evaluate health advertisements
 - 1. Information about the product should be known to the consumer
 - 2. Guides for evaluating health advertising and reaching decisions about purchasing products

- a. Does the product have demonstrated value?
- b. Of what does the product consist?
- c. Is the price comparable to other similar products?
- d. Is proof provided to substantiate the advertising claim?
- e. Is the product known to be harmless?
- f. Are evasive or unclear statements made?
- g. Does this advertisement have any special appeal?
- h. Do I need to buy this product?
- i. Does the advertiser resort to the use of testimonials?
- j. Do you get the impression (from the ad) that if you do not select this product, you won't be like other people?

XI. Evaluating Health Information

- A. Reliable sources
 1. Medical doctors
 2. Dentists
 3. Health department
 4. Pharmacists
- B. Unreliable sources
 1. Mass media
 - a. T.V.
 - b. House to house peddling
 - c. Newspaper
 - d. Mail order gimmicks
 2. "Friendly" advice
- C. Consumer motivation
 1. Motives
 2. Consumer purchasing patterns
 3. Teenage consumer

XII. Fraudulent Consumer Information

- A. What is a quack?
 1. Recognizing a quack
 2. Common quack approaches
 3. Hazards of quackery
- B. Why people consult medical frauds
 1. Fear
 2. Lack of information
 3. Emotional appeals of nostrums and devices
 4. Specific cases and kinds of quackery

XIII. Health Personnel and Medical Care

- A. Physicians and dentists
- B. Para-medical specialists
- C. Other health personnel
- D. Medical care
- E. Insurance
 1. Health (Private)
 2. Medicare
 3. Medicaid
- F. Health facilities
- G. Is there a health career for you?

XIV. Relationship of Health Information to Personal Health Status

- A. Proper medical care
 - 1. Regular medical check-up
 - 2. Use of prescription drugs
- B. Unreliable health related practices
- C. Selection of Qualified, Competent, Medical Practitioners

XV. Agencies Used to Keep a Community Healthy

- A. Board of Health
 - 1. Communicable disease control
 - 2. Vital statistics
 - 3. Sewage disposal
 - 4. Garbage disposal
 - 5. Milk and water control
- B. State Department
 - 1. Air pollution
 - 2. Stream pollution
 - 3. Industrial waste control
 - 4. Enforcement of sanitary laws
- C. Federal Agencies
 - 1. Department of Health, Education, and Welfare
 - 2. Department of Agriculture

CONSUMER, ENVIRONMENTAL AND PUBLIC HEALTH

ACTIVITIES

1. Make a bulletin board showing how man interacts with his environment.
2. Have the class prepare a "running check list" of all the various environmental factors that affect health.
3. Construct a bulletin board display using pictures to illustrate the common sources of air pollution (water, noise, etc. may also be used). Key the pictures to phrases which explain each cause.
4. Have a student group report on the various agencies, public and private, and their roles in helping to combat pollution problems.
5. Develop a list of health services that are available in the local community.
6. Select three career interests and write a short paper on the qualifications needed, training required, license (if required), functions of and possible need for such personnel.
7. Ask students to be aware of unsanitary practices or of heavily littered areas observed in the community. Have them determine if a law is being broken and if there is an agency to correct the problem.
8. Arrange a trip to a water treatment plant or to a conservation area. Class discussion on the variety of responsibilities in these areas. Discussion of federal, state and local laws concerning these areas.
9. Discuss how water becomes unfit to drink.
10. Discuss the various methods by which disease organisms are transmitted - various vectors, etc.
11. Discuss household and field pests (rats, mice, roaches, flies, other rodents).
12. Arrange a trip to sewage disposal plant. Discussion on local efforts to protect water (proximity of sewer lines to fresh water lines), water purification methods, recycling techniques.
13. Plan an outdoor trip; investigate knowledge needed about environmental factors; what equipment would be required to maintain comfort?
14. Read about and discuss the history of disease prevention.
15. Consult the local health officer and report on sicknesses and deaths within the community as related to air or water pollution.
16. Discuss the work being done to prevent pollution in recreational and camping areas; have the students construct posters showing how they could help to maintain these areas.

17. Discuss how disease can be transmitted by pets.
18. Have students construct posters showing life cycles of flies, mosquitoes, and other disease vectors.
19. Have representatives of the American Red Cross and Civil Defense explain their role in such events as floods, tornadoes, fire, nuclear warfare, etc.
20. Investigate the nature of air pollution and the role of the Health Department in this problem.
21. Invite local public health official to discuss the laws in your area which govern waste disposal.
22. Discuss the importance of immunization programs. Have a physician or nurse explain these programs to your class.
23. Construct a list of diseases for which vaccines are available and chart pupils in class who have been immunized for each.
24. Have students identify medical specialists and tell what each does. (Examples: pediatrician, dermatologist; ophthalmologist, obstetrician.)
25. Describe the role of the national and international agencies such as Food and Drug Administration, Federal Trade Commission, Department of Agriculture, Post Office Department, Health Departments, UNESCO, and the World Health Organization.
26. Analyze and appreciate the role of professional groups, such as the American Medical Association, The American Dental Association, voluntary groups as American Cancer Society and others.
27. Discuss the statement, "Everyone is a health consumer".
28. Have the class list some of the products that affect health; classify them as beneficial or harmful substances.
29. Invite the school nurse or physician to discuss what health services are needed by a family and how these may be secured.
30. Develop a set of standards with the class for evaluating health products and services.
31. Collect clippings of advertised products. Identify words that have emotional overtones, and point out ways people are influenced to buy and use these products. Make a class scrapbook or posters.
32. Display pictures of gadgets and devices or the real objects sold by quacks. These might be obtained from the Food and Drug Administration or other groups.
33. Develop a bulletin board for the nurse's office on health services available to students.

34. Develop a bulletin board display illustrating the health protection afforded by community agencies.
35. Develop in the students an interest in recycling of materials.
36. Make a word collage for the bulletin board related to a clean environment.
37. Analyze advertisements for "sense appeal". Determine which sense the advertisement is directed toward; what claims are made; how realistic the claims are, and whether the advertising message is direct or implied.
38. Bring an empty OTC drug bottle to class and an advertisement for this product. Read the wording on the box or label carefully to the class. Ask the following questions:
 - What precautions are suggested?
 - Are possible side-effects mentioned?
 - Is there an indication that the drug could be poisonous? If so, is an antidote specified?Now read the ad to the class. Are side-effects, precautions, or possible poisonous properties mentioned?
39. On a poster board, make a copy of a label from a prescription drug. Use this display to discuss the usefulness of a prescription. You may find that many of the young people in your classroom do not understand the purpose of all the items on the label or why it is important to take the drug in its entirety at the times which were directed by the doctor unless side-effects occur.
40. Many health products are advertised seasonally and in certain types of media. Using ads from magazines, prepare a display of these ads. Group the ads in such a way that the viewer can recognize the seasonal nature of the ad, as well as the age group for whom the product is intended. For example: nose drops and cough remedies in the winter and suntan lotions in the summer.
41. Is there a difference in the techniques used by tobacco advertising agencies and the ones used by liquor advertising agencies. Using pictures from magazines and newspapers, compare the advertising techniques of these two agencies.
42. Discuss the effects of no water, air, food on society.
43. Discuss pollution of the Tioughnioga River.
44. Compare contents of same product obtained at high and low prices and quality of items purchased in a discount store. Refer to book, THE MEDICINE SHOW.
45. Tape record radio or television commercials relating to CHILDREN'S and TEENAGER'S health, and help pupils to evaluate and discuss advertising.

46. Make posters, bulletin board display highlighting the emotional appeals of advertised health products.
47. Display items or labels from products that are available in various "health food stores". Evaluate these items on the basis of standards.
48. Discuss emotional influence of advertising (TV, magazines, etc.) on consumer health purchasing.
49. Have the students form the habit of looking for and collecting news and magazine articles relating to health services and products.
50. Have students prepare a class list of the various types of doctors and health specialists. State the special function of each. Then, have students check the local yellow pages to determine how many and what types of physicians are listed as practicing in this county.
51. Review the sources from which you can obtain reliable unbiased health information as - own physician, local medical society, Better Business Bureau, American Medical Association, Federal Food and Drug Administration, etc.
52. Review safety precautions in taking medicine, also safety precautions to be taken with medications in the home. Include the importance of reporting unusual reactions of persons to medications prescribed by a physician.
53. Discuss the dangers of ignoring illness and unusual symptoms, and the importance of giving accurate information of all symptoms to a physician.

RESOURCES

Books:

- The True Book of Bacteria; Anne Frahm; Children's Press; 1963
- The First Book of Microbes; Lucia Z. Lewis; Scott-Foresman; 1955
- Junior Science Book of Bacteria; Lietz; Garrard; 1962

HENS:

- Consumer Education Materials, BOCES #HN-6
- Health Careers Information, BOCES #HN-16

FILMS:

- The Animals Are Crying, BOCES #832-282, 15 minutes
- The End of One, BOCES #831,220, 7 minutes
- Everglades (National Park), BOCES #831-361, 7 minutes
- Growing, Growing, BOCES #831-276, 11 minutes
- The Lorax, BOCES #833-87, 24 minutes
- Our Wilderness, BOCES #831-274, 10 minutes
- Teaching About Advertising, BOCES #392-20
- Air is for Breathing, Shell Oil Company, Color, Free Loan
- Cities in Crisis, BOCES #832-70, 21 minutes
- Cry of the Marsh, BOCES #832-237, 12 minutes
- Ecology: Checks and Balances, BOCES #832-249, 14 minutes
- The Great American Trash Can, American Glass Container Company, Free Loan
- Peace and Voices in the Wilderness, BOCES #831-235, 9 minutes
- Two Yosemite, BOCES #831-179, 10 minutes
- Acupuncture, An Exploration, BOCES #832-280, 16 minutes
- Brand Names and Labeling Games, BOCES #831-358, 9 minutes

FILMS (Cont.):

Consumer Power: Advertising, BOCES #832-183, 22 minutes

Is a Career in Health Services for You, BOCES #832-309, 14 minutes

Label Logic, BOCES #832-40, 18 minutes

This is Fraud, BOCES #831-351, 9 minutes

Automania 2000, BOCES #831-210, 10 minutes

Boomsville, BOCES #831-209, 11 minutes

Controversy Over Industrial Pollution, BOCES (video cassette), 17 minutes

Buy and Buy, (from Inside/Out Series), BOCES (video cassette), 15 minutes

Dehumanizing City, BOCES #832-211, 16 minutes

Noise: Polluting the Environment, BOCES (video cassette), 16 minutes

Advertising: Information, Persuasion or Deception, BOCES #832-273, 12 minutes

Consumerism: Let the Seller Beware, BOCES #832-234, 22 minutes

There is a Law Against It, BOCES #831-350, 8 minutes

FILMSTRIP AND CASSETTE:

Witchcraft to Modern Medicine, BOCES #392-7

Commitment, filmstrip and record, International Paper Company, Free Loan

Man's Natural Environment: Crisis Thru Abuse, BOCES #333-95, 26 minutes

PAMPHLETS:

Chamber of Commerce
Co-operative Extension
Insurance Companies

The Blue Cross Story, BOCES #P-80

The Hospital People, BOCES #P-82

The Job You Want, BOCES #P-106

SAFETY AND FIRST AID

OVERVIEW

Leadership for safety education must originate within the school through direct and indirect experiences. Indirect experiences come through living in a safe environment, both at work and in play. Direct experiences come through class instruction in safety and participation in student safety organizations.

Safety is an important topic that needs to be covered rather extensively. As a young adult, the student will soon be leaving the artificial and antiseptic environment of the classroom and forced to fend for himself. Employers are concerned with safety, as are motorists, parents, and all citizens. Safety is everyone's responsibility and should be treated thusly.

Preventive first aid is the best kind, and that means safety consciousness always. However, accidents do happen. The educable mentally retarded are certainly capable of and, therefore, should be taught simple, but effective, first aid procedures for minor injuries and for as many of the major emergencies as their individual capabilities will permit.

OBJECTIVES

Suggested Pupil Outcomes:

1. Understand and express the idea that accidents are caused by human and environmental factors.
2. Recognize that there is a relationship between one's activities, attitudes, emotions, and accidents.
3. Identify areas of risk to individual and group safety that might occur specifically during holiday time.
4. Identify areas of risk to individual and group safety that might occur during a particular season of the year.
5. Define some hazards to the pedestrian, the bicyclist, the bus passenger, and the automobile passenger and ways to avoid them.
6. Contribute toward the development of a safe home, school and community environment.

7. Illustrate the relationship between human behavior and accidents.
8. Outline basic first aid procedures commensurate with his/her capabilities.
9. Demonstrate the effective use of basic first aid equipment/supplies.
10. Practice standard first aid procedures commensurate with his/her capabilities.
11. Express in one's own words the idea that first aid is the immediate and temporary help given to the victim of an accident, sudden illness, or a disaster until medical help is obtained.

MAJOR CONCEPTS

1. A responsible person prepares himself for emergencies and disasters.
2. Recreational activities can be safer and more enjoyable through the knowledge and practice of safety rules.
3. A knowledge of the cause and kind of accidents can help individuals plan for more responsible action.
4. Many home accidents can be eliminated by the action of individual family members.
5. Certain factors contribute to motor vehicle, home, school, and occupational accidents, but action can be taken to cut down the toll.
6. Highway safety is primarily the responsibility of the individual driver.
7. Most highway accidents are preventable.
8. The individual should be able to recognize and handle the minor emergencies which occur in everyday living which require first aid.
9. First aid is the immediate and temporary help rendered to the victim of an accident or sudden illness until medical aid can be obtained.

CONTENT OUTLINE

- I. Traffic Safety
 - A. Traffic signs
 - B. Identifying accident causes
 - C. Pedestrian accidents
 - D. Safety patrol
 - E. Bicycles and motorcycles
 - F. Traffic regulations
 - G. Seat belts
- II. Safety in and Around the Water
 - A. Swimming
 - B. Boating
- III. Safety with Fire
 - A. Matches - their proper use and storage
 - B. Man-made causes of fire
 - C. Some liquids that can burn
 - D. Community efforts in fire protection
 - E. Individual efforts in fire prevention and protection
 - F. Proper procedures in case of fire
 - 1. Fire drills in school
 - 2. Fire drills for specific areas of the home
- IV. Safety Education
 - A. Purpose
 - B. Causes of accidental injury and death
 - C. Incidence of accidents in U.S.
 - D. Responsibility for resolving accident problems
 - E. Selected accidents (causes and prevention)
 - 1. Motor vehicle
 - 2. Home
 - 3. Recreational
 - 4. Occupational
 - 5. School
- V. Basic First Aid
 - A. Basic principles
 - 1. Knowing how and sending for help
 - a. Doctor
 - b. Police, fire or emergency squad
 - c. Poison Control Center (if near one) or local hospital
 - 2. Treating for shock
 - 3. Providing for comfort and safety of the victim within limits
 - B. Control of bleeding
 - 1. Types of bleeding
 - a. Nosebleed
 - b. Cuts
 - c. Puncture wounds
 - d. Internal

- V. B. 2. Methods of control
 - a. Direct pressure
 - b. Application of cold packs
 - c. Pressure points
 - d. Elevation of affected part (when possible)
 - e. Bandaging
 - f. Treat for shock
- C. Restoration of breathing
 - 1. Common causes of stoppage of breathing
 - a. Asphyxiation
 - b. Drowning
 - c. Electrocution
 - d. Heart attack
 - e. Obstructed airway
 - 2. Artificial respiration
- D. Contusions (bruises) and sprains
 - 1. Application of cold packs
 - 2. Disinfection in case of abrasions
- E. Possible fractures and dislocations
 - 1. Do not move unnecessarily
 - 2. Immobilize the part (usually by splinting)
 - 3. Keep victim warm and treat for shock
 - 4. Seek medical attention
- F. Burns
 - 1. Heat induced
 - a. Degrees of burns
 - b. Cold water
 - 2. Chemical
 - a. Acids and bases
 - b. Wash immediately with copious amounts of water
 - c. See doctor as soon as possible
- G. Exposure to cold
 - 1. Gradual warming
 - 2. Movement to restore circulation
- H. Poisoning
 - 1. Common causes
 - a. Drugs
 - b. Toxic gases
 - c. Household chemicals
 - 2. Get help immediately
 - a. Poison Control Center
 - b. Physician or hospital
 - 3. Look for kind of poison
 - 4. Save poison sources/containers for medical person's inspection
- I. Insect bites and stings
 - 1. Wash
 - 2. Disinfect
 - 3. Apply cold
 - 4. Seek medical help if necessary
- J. Animal bites
 - 1. Wash and disinfect
 - 2. Get professional help
- K. Strains
 - 1. Common causes
 - 2. Apply mild heat

- V. L. Emergency care of other minor injuries
 - 1. Blisters
 - 2. Fainting
 - 3. Heat stroke
 - 4. Earache
 - 5. Slivers
 - 6. Convulsions

- VI. The First Aider's Personal Responsibilities in Emergencies and Disasters
 - A. Calmly take charge
 - B. Check for sources of immediate danger
 - C. Administer needed first aid of which you are capable
 - D. Call for help as soon as possible, if needed

LEARNING AND EVALUATIVE ACTIVITIES

1. Bring in newspaper accounts of accidents and have discussion period to try and determine causes and prevention.
2. Discuss close calls, and minor accidents happening to students. Note how some minor accidents become major ones and how to prevent them from happening again.
3. Make a card for home use listing telephone number of fire and police departments, ambulance, family doctor, nearest relative, and poison control center.
4. Gather news clippings about recent fires. Try to determine how they could have been avoided.
5. Invite an electrician from the power company to discuss electrical hazards with the class.
6. Participate in fire drills. Discuss ways to improve fire drills. Notice location of fire safety equipment in building.
7. Invite a nurse or physician to speak to class about importance of first aid and basic procedures.
8. Have the students divide up in pairs and practice taking a pulse.
9. Demonstrate how a compress or a bandaid can be removed from its sterile packaging and applied to an injury without contamination. Allow the students to practice on each other.
10. With adult supervision, perform a test to determine how far can be seen at night on a highway. Select a quiet spot such as the school parking lot. Determine the distance a person in a parked car can see if his lights are on high and low; if the pedestrian is wearing dark clothes; if he is wearing a small amount of white; if he is wearing a sizeable area of white, or if he is carrying a flashlight. Compare these distances with charts which show how far an automobile travels before coming to a stop at various speeds.
11. Bulletin board - newspaper clippings of accidents which were caused by various unsafe practices.
12. Have the students make safety posters.
13. A similar activity would be to invite the school nurse, coach, and industrial arts instructor to speak to the class on their experiences with accidents relating to the school.
14. Appoint a student to consult the local fire department and find out the causes of the fires which occurred during the past year. Report the information to the class.

15. Have each student devise and illustrate a plan of escape which could be used if their house were to catch on fire during the night.
16. Have small class groups devise a safety check list for various activities (operating an outboard motor; a power mower; storing paint materials, etc.). Have this check list put on a mimeo master, duplicated, and made available to people in the community.
17. Have the class make a list of the contents to be found in a good home medicine cabinet. Devise the same for a travel kit. Also, prepare and implement such a kit to be assigned for possible classroom use.
18. Have children make a collection of magazine pictures to be used in a chart depicting household products which may be dangerous; assemble pictures by rooms in a house (bathroom, laundry, etc.).
19. Have a member of a snowmobile club visit class to discuss safety pointers.
20. Have the students determine the frequency of pedestrian accidents. Do they tend to occur at common locations? Times?
21. Invite the driver education instructors to class to speak on the causes of motor vehicle accidents.

RESOURCES

Books:

First-Aid: A Programmed Text, B. Haller Igel; Instructional
Materials Lab, 18 East 41st Street, New York, New York 10017

FIRST AID
RE-ORDER FORM

Mail to: Instructional Materials
Laboratories, Inc.
18 East 41st Street
NYC, N.Y. 10017

FIRST AID COURSE by Johnson & Johnson. Classroom Sets consist of 30 117-page Programmed Textbooks, 30 Test Booklets, 30 Safety Check Lists, Teacher's Manual, color film strip, classroom demonstration kit of first aid products, 30 course completion cards and achievement certificates. Adjunct Sets (as a supplement for a class larger than 30) consist of 10 Programmed Textbooks, 10 Test Booklets, 10 Safety Check Lists, and 10 course completion cards. From Instructional Materials Laboratories Inc., 18 E. 41st St., New York, N.Y. 10017.

—Classroom Set \$12, postpaid — Adjunct Set \$4, postpaid

Name _____

School _____

Address _____

City _____

State _____

Zip _____

☐ Bill Me

☐ Bill My School

Health and Growth Series - Grade 8, Healthful Living Program,
Scott, Foresman and Company, Glenview, Illinois 60025

Safety for Teenagers, Scott, Foresman and Company,
Glenview, Illinois 60025

Standard First Aid and Personal Safety, American Red Cross Manual

Films:

Fire: Two Ways Out, BOCES #831-365, 11 minutes

Honda Safety, (motorcycles), BOCES #832-283, 832-284, 2 reels,
45 minutes

Mini-Bike, BOCES #833-110, 27 minutes

Motorcycle Safety, BOCES (video cassette), 14 minutes

Rescue Squad, BOCES (video cassette), 14 minutes

To a Babysitter, BOCES #832-338, 14 minutes

Understanding Stresses and Strains, BOCES #831-190, 10 minutes

Water: Friend or Foe, BOCES #833-141, 23 minutes

Kits:

Practoplasts, BOCES #123-21

Resusci-Anne, BOCES #123-2